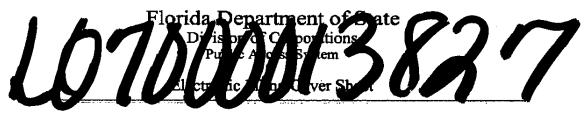
Division of Corporations



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(((H07000033266 3)))



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To:

Division of Corporations

Fax Number : (850)205-0383

Account Name

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 12000000146

: (305)444-4994

Phone

Fax Number

: (305)444-4977

ORIDA/FOREIGN LIMITED LIABILITY CO.

B & M ELECTRIC & SUPPLY, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Feb 05 2007 23:58

| The name of the Limited Liability Con | ipany is: | |
|--|--|-----------------|
| B & M ELECTRIC & SUPPLY, LLC (Must end with the words "Limited Liability Comp. | any, "Limited Company" or their abbreviation "LLC," or " | L.C.,'') |
| ARTICLE II - Address: The mailing address and street address | of the principal office of the Limited Liabili | ity Company is: |
| Principal Office Address: | Mailing Address: | |
| 1635 W 44 PLACE | 1635 W 44 PLACE | |
| #210 | #210 | 416 |
| HIALEAH, FL 33012 | HIALEAH, FL 33012 | |
| | egistered Office, & Registered Agent's Sig own Registered Agent. You must designate an individual | |
| The name and the Florida street addres | s of the registered agent are: | FEB CRET |
| M | ARTIN PEREZ | AS AS |
| | Name | SERV 6 |

FL 33012 City, State, and Zip Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and

Florida street address (P.O. Box NOT acceptable)

Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.,

1635 W 44 PLACE #210

(CONTINUED) Page 1 of 2

(((H07000033288)))

| <u>Title:</u> "MGR" = Mai "MGRM" = M | nager Ianaging Member | r | Name and Address: | | |
|--|--|--|--|---|------------------|
| MGRM | | | MARTIN PEREZ | | |
| | . • | | 1635 W 44 PLACE #210 | | |
| | | , | HIALEAH, FL 33012 | | |
| MGRM | | | BRAUNYS ALFONSO | | |
| | | | 1635 W 44 PLACE #210 | · · · · · · · · · · · · · · · · · · · | |
| | | | HIALEAH, FL 33012 | | |
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| (Use attachme | ont if necessary) ve date, if other th | an the date | e of filing: | . (OPTION | VAL) |
| TICLE V: Effective date is 90 days after the | ve date, if other the listed, the date me date of filing.) | | e of filing: ecific and cannot be more than five | (OPTION | VAL) ays pri |
| TICLE V: Effective date is 90 days after the | ve date, if other th listed, the date m | | | . (OPTION business d | NAL) ays pri |
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| TICLE V: Effective date is 90 days after the | ve date, if other the listed, the date in date of filing.) SIGNATURE: Signature of a line of this document | nust be specification of the section constitutes | an authorized representative of a member o | SECRETAL TALLAHAS | NAL) ays pri |
| TICLE V: Effective date is 90 days after the | ve date, if other the listed, the date in e date of filing.) SIGNATURE: Signatur of a 1 | nust be specification of the section constitutes | an authorized representative of a member o | SECRETAL TALLAHAS | ays pri 07 FEB - |