

Florida Department of State
Division of Corporations
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To:
Division of Corporations
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From:
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Indigo Lighting, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Indigo Lighting LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following:

David S. Perkins
(Name of Person)

Indigo Lighting LLC
(Firm/Company)

595 W. Church Street Suite 621
(Address)

Orlando FL 32805
(City/State and Zip Code)

For further information concerning this matter, please call:

David S. Perkins at (407) 446 3446
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Indigo Lighting LLC**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:595 W. Church Street Suite 621Orlando FL 32805**Mailing Address:**Same**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**
The name and the Florida street address of the registered agent are:David S. Perkins
Name595 W Church Street Suite 621
Florida street address (P.O. Box **NOT** acceptable)Orlando FLORIDA 32805
City, State, and Zip

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

David S. Perkins

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGR

David S. Perkins
553 W Church Street Suite G21
Orlando FL 32805

MGRM

Anthony Lubello
2747 Tally Ho Ave
Orlando, FL 32826

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**DJ & PL

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

David S Perkins

Typed or printed name of signer

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 TALLAHASSEE FLORIDA

FILED**Filing Fees:**

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)