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Mansour, Gavin, Gerlack & Manos Co., L.P.A.

Writer's E-mail mtucci@mggmlpa.com

March 2, 2007

Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Re: Service Excellence Corps, LLC

Dear Sir/Madam:

Enclosed herewith please find two (2) copies of the Articles of Organization for Florida Limited Liability Company. Please file in your usual manner and return a time-stamped copy to me in the self-addressed stamped envelope provided.

I am also enclosing a check in the amount of One Hundred Thirty Dollars (\$130.00) for the filing fee and a Certificate of Status.

If you should have any questions, please feel free to contact me.

Very truly yours,

Michael R. Tucci

MRT/kah Enclosure

COVER LETTER

TO: Registration Division of 0					
SUBJECT: Servi	ce Excellence Corps, L	LC d Liability Company)			
	(Name of Limite	d Liaonity Company)			
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.			
Please return all corre	espondence concerning this matte	er to the following:			-
Michael F	R. Tucci, Esq.				
	(Name of Person)	· · · · · · · · · · · · · · · · · · ·	0	8.4 E.4
Mansour,	Gavin, Gerlack & Ma	nos Co., LPA		.07 HAR 19 PM 1: 12	SION
	(Firm/Company)		19	유지
55 Public	Square, Suite 2150)		72	CORPORATIONS
	<u></u>	(Address)		- -	S AA
Clevelan	d, Ohio 44113			12	SNOL
		/State and Zip Code)			
For further information	on concerning this matter, please	call:			
•		at ()			
(Na	me of Person)	at ()(Area Code & Daytime T	elephone Number)		
Enclosed is a check	for the following amount:				
□ \$125.00 Filing Fe	e \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing 1 Certificate of Status Certified Copy (additional copy is enclosed)	s &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	ns		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 7, 2007

MICHAEL R. TUCCI MANSOUR, GAVIN, GERLACK & MANOS CO., L.P 55 PUBLIC SQUARE, SUITE 2150 CLEVELAND, OH 44113

SUBJECT: SERVICE EXECLLENCE CORPS, LLC

Ref. Number: W0700004426

We have received your document for SERVICE EXECLLENCE CORPS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORPS." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 707A00016364



Mansour, Gavin, Gerlack & Manos Co., L.P.A.

Writer's E-mail mtucci@mggmlpa.com

March 13, 2007

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: SECORPS, LLC

Dear Sir/Madam:

Enclosed herewith please find a copy the revised Articles of Organization for Florida Limited Liability Company. Please file in your usual manner and return a time-stamped copy to me in the self-addressed stamped envelope provided.

If you should have any questions, please feel free to contact me.

Very truly yours,

Michael R. Tucci

MRT/kah Enclosure

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECORPS, LI (Must end with the wo		ny, "Limited Company" or their abbreviation "LLC,"	or "L.C.,")
ARTICLE II - A	Address:		
The mailing addi	ress and street address of	of the principal office of the Limited Lia	bility Company is:
Principal Office	Address:	Mailing Address:	
4171 Las Palmas W	ay	4171 Las Palmas Way	
Sarasota, FL 34238		Sarasota, FL 34238	
(The Limited Liability business entity with	Company cannot serve as its can active Florida registration.)	gistered Office, & Registered Agent's own Registered Agent. You must designate an individual of the registered agent are:	or another 9 PH
	Louis G. Joseph		TATE RATIONS 1: 12
		Name	10 55
	4171 Las Palmas V	vay	
	Florida	street address (P.O. Box NOT acceptable)	
	Sarasota	FL 34238	
	Cit	y, State, and Zip	
Harrison bears on	J as ussistand	and to accord and in affirmation for the	Larra adada d Danier d

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, F.S.

Registered Agent's Signature (REQUIRED

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
Managing Member	The Brewer-Garrett Company 6800 Eastland Road Middleburg Heights, Ohio 44130				
Managing Member	Tolin Mechanical Systems Co. 12005 East 45th Avenue Denver, Colorado 80239				
	OT MAR				
	19 PH 1:12				
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)					
REQUIRED SIGNATURE:					
(In accordance with section of this document constitute that the facts stated herein	an authorized representative of a member. 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.)				
Louis G. Joseph Typed or printed name of signee					

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)