## L07000103875

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me) .
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
OF OF THE PRINCIPAL STATEMS

## **COVER LETTER**

Division of	Corporations			
SUBJECT:		nstallation LLC		
	(Name of Lin	nited Liability Company)		
The enclosed Articles	s of Organization and fee(s) ar	e submitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
•	De	ennis Slomba		
		(Name of Person)		
	Slomb	a Installation LLC		
	•	(Firm/Company)		
	6011 Citrus	Highlands Drive Sout	h	
11411111		(Address)		07
	Barto	w, Florida 33830	,	OCT OCT
	(C	Sity/State and Zip Code)		F
For further information	on concerning this matter, plea	se call:		OT OCT   1 PM 1: 48
Denn	is Slomba	at ( 863 ) 667-470	8	84
(Nai	me of Person)	(Area Code & Daytime Tele	phone Number)	
Enclosed is a check	for the following amount:			
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee Certificate of Statu Certified Copy (additional copy is encl	s &
	Moiling Address	Stroot/Courier Address		

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301





## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

()		oa Installa Limited Liability	Company, "L.L.C.," or "LLC.")	
		•		
ARTICLE II - A The mailing addre		ess of the prin	cipal office of the Limited Liabi	lity Company is
Principal Office	Address:	٠.	Mailing Address:	
6011 Citrus Highlan	ds Drive South		6011 Citrus Highlands Drive South	
Bartow, Florida	33830		Bartow, Florida 33830	
		·		
			Office, & Registered Agent's Sign Agent You must designate an individua	ignature
(The Limited Liability		s its own Register	Office, & Registered Agent's Signate an individua	it or another
(The Limited Liability business entity with an	Company cannot serve as	s its own Register on.)	ed Agent. You must designate an individua	ignature 07 OCT 11
(The Limited Liability business entity with a	Company cannot serve as a active Florida registration Florida Street additional Company of the C	s its own Register on.)	ed Agent. You must designate an individual	T - T
(The Limited Liability business entity with a	Company cannot serve as a active Florida registration Florida Street additional Company of the C	s its own Register on.) ress of the reg	ed Agent. You must designate an individual	T - T
(The Limited Liability business entity with a	Company cannot serve as a active Florida registration Florida Street additional D	s its own Register on.) ress of the reg ennis Slo Name	ed Agent. You must designate an individual gistered agent are:	T - T
(The Limited Liability business entity with a	Company cannot serve as a active Florida registration Florida street addu D 6011 Citru	s its own Register on.) ress of the reg ennis Slo Name	ed Agent. You must designate an individual	T I I
(The Limited Liability business entity with a	Company cannot serve as a active Florida registration Florida street address D  6011 Citru Florida	s its own Register on.) ress of the reg ennis Slo Name	ed Agent. You must designate an individual gistered agent are:  mba  ds Drive South	T - T
(The Limited Liability business entity with an	Company cannot serve as a active Florida registration Florida street address D  6011 Citru Florida	s its own Register on.)  ress of the reg ennis Slow Name  IS Highlan rida street addre	ed Agent. You must designate an individual distered agent are:  mba  ds Drive South ss (P.O. Box NOT acceptable) FL 33830	T - T

Registered Agent's Signature (REQUIRED)

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

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

MGR	Dennis Slomba
	6011 Citrus Highlands Drive South
	Bartow, Florida 33830
MGRM	Theresa Slomba
	6011 Citrus Highlands Drive South
	Bartow, Florida 33830
,	
	•
(Use attachment if necessary)	1
(Ose attachment it necessary)	' ·
LE V: Effective date, if other	than the date of filing: (OPTION
	must be specific and cannot be more than five business da
fective date is listed, the date	
fective date is listed, the date days after the date of filing.)	
days after the date of filing.)	

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)

that the facts stated herein are true.)

Dennis Slomba
Typed or printed name of signce