L07000110293

| (Re | equestor's Name) | |
|-------------------------|----------------------|-----------|
| (Ac | idress) | |
| (Ac | idress) | |
| (Ci | ty/State/Zip/Phone i | #) |
| PICK-UP | ☐ WAIT | MAIL |
|) (Bu | usiness Entity Name | e) |
| (Do | ocument Number) | |
| Certified Copies | Certificates o | of Status |
| Special Instructions to | Filing Officer: | |
| | Office Use Only | , |



200108431652

10/31/07--01005--002 **160.00

OTOCT 31 AM 9: 10

DIVISION OF THE PROPERTY OF

O7 OCT 31 PH 1: 32
SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER *

TO:

Registration Section

| Division of Corporations |
|--|
| SUBJECT: James F. Reid Sheet Metal, 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: James F. Reid (Name of Person) James F. Reid Sheet Metal, LLC |
| Please return all correspondence concerning this matter to the following: |
| James F. Reid |
| (Name of Person) |
| |
| (Firm/Company) |
| 4001 Griffin Road |
| (Address) |
| Ft. Lauderdale, Florida 33314 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| James F. Reid _{at (} 954) 240-9767 |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Status}\$\$ Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed) |
| Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301 |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | |
|--|--|------------------------|
| The name of the Limited Liability Company is: | : | 1.0 |
| | | ASE IT |
| James F. Reid Sheet Metal, LLC | | OT OCT 31 |
| (Must end with the words "Limited Liabi | lity Company, "L.L.C.," or "LLC.") | 7,50 |
| | | 100 × 10 |
| ARTICLE II - Address: | | mg = |
| The mailing address and street address of the p | rincipal office of the Limited | l Liability Company is |
| | | '유도 3 2 |
| Principal Office Address: | Mailing Address: | 5m |
| | | ア |
| 4001 Griffin Road | PO Box 1599 | |
| Ft. Lauderdale, Florida 33314 | Dania Beach, Florida 33004-159 | 99 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) | stered Agent. You must designate an in | |
| The name and the Florida street address of the | registered agent are: | |
| James F. Reid | | |
| Name | | |
| 4001 Griffin Road | | |
| Florida street ad | dress (P.O. Box NOT acceptable) | |
| Ft. Lauderdale 333 | 14 _{FL} | |
| 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 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:

| MGR | | James F. Reid |
|---|-----------------------|---|
| | | 4001 Griffin Road |
| | | Ft. Lauderdale, Florida 33314 |
| | | |
| | | |
| | - | |
| | | |
| | | |
| | | |
| (Use attachment if | necessary) | |
| LE V: Effective da | te. if other than the | date of filing: (OPTIONA |
| ffective date is listed days after the date | l, the date must b | e specific and cannot be more than five business da |
| any built int and | | , |
| | | |

(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.)

James F. Reid

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)