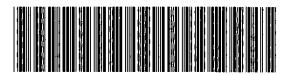
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: J & S AIRCONDITIONING, 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:	
JOHN S. LLOYD	
(Name of Person)	
J & S AIRCONDITIONING, LLC	
(Firm/Company)	
6473 NW 21st COURT	
(Address)	_
MARGATE, FL 33063	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
JOHN S. LLOYD _{at (} 954 ₎ 673-9956	
(Name of Person) (Area Code & Daytime Telepl	none Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy (additional copy is enclosed)	6160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CirTallahassee, FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: J & S AIRCONDITIONING, LLC. (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address: Mailing Address:** 6473 NW 21st COURT 6473 NW 21st COURT MARGATE, FL 33063 MARGATE, FL 33063 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: JOHN S. LLOYD Name

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..

City, State, and Zip

Florida street address (P.O. Box <u>NOT</u> acceptable)

E, _{FL} 33063

Registered Agent's Signature (REQUIRED

6473 NW 21st COURT

MARGATE,

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

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

Name and Address:	
JOHN S. LLOYD	
6473 NW 21st COURT	
MARGATE, FL 33063	
	
	JOHN S. LLOYD 6473 NW 21st COURT

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: November 14, 2007. (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:

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.)

JOHN S. LLOYD

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)