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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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COVER LETTER

TO: **Registration Section Division of Corporations** SUN PRO COMPANY, 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: GARY G. BJERGUM (Name of Person) Company LLC (Firm/Company) PO BOX 1913 FL 34478-1913 (City/State and Zip Code) For further information concerning this matter, please call:
 6.
 B TERGUM
 at (608)
 790 - 7944

 (Name of Person)
 (Area Code & Daytime Telephone Number)
 Enclosed is a check for the following amount: \$125.00 Filing Fee \$\sum \$130.00 Filing Fee & **■** \$160.00 Filing Fee, \$155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy

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

(additional copy is enclosed)

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 21, 2007

GARY G. GJERGUM PO BOX 1913 OCALA, FL 34478-1913

SUBJECT: SUN PRO COMPANY, LLC

Ref. Number: W07000057112

We have received your document for SUN PRO COMPANY, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, er it is not distinguishable from the name of an existing entity. Section 608.4057 Florida Statutes, was amended effective July 1, 2007, to require the name of limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L04000037124.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 407A00066842

Division of Compositions D.O. DOV 6207 Wellahamas Elevida 20214

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sun PRO PROFESSIONAL SERVICES 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:	<u>Mailing Address:</u>
1041 NE 6TH BLVD #476 WILLISTON, FL 32696	PO BOX 1913 OCALA, FL 34478-1913
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the EGARY 6. Box Name	registered agent are: JERGUM TERGUM TERGUM
Florida street ad WILL IS TON City, State,	dress (P.O. Box <u>NOT</u> acceptable)

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: Title: Name and Address:

"MGR" = Manager "MGRM" = Managing Member		
MGRM	GARY G. BJERGUM PO BOX 1913 OCALA, FL 34478-1913 GARY G. BJERGUM 1041 NE 6TH BLVD #476 WILLISTON, FL 32696	
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(Use attachment if necessary)	TILED TOEC -3 PM SECRETARY OF SALLAHASSEE, FLO	るだが
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	e date of filing: (OEEN NAE) e specific and cannot be more than five business days prior	

REQUIRED SIGNATURE:

Signature of a member of 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.)

GARY G. BJERGUM
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)