

Florida Department of State

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To:

Division of Corporations

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From:

Account Name : CSH SERVICES, LLC Account Number : 120070000160 Phone : (800)494-3124 Fax Number : (561)455-9885

FLORIDA/FOREIGN LIMITED LIABILITY CO.

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First Source Equipment Repair, LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: FIRST SOURCE EQUIPMENT REPAIR, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

9625 HAZEL LAKE DR

JACKSONVILLE, FLORIDA 32222

ARTICLE III REGISTERED AGENT. REGISTERED OFFICE & <u>REGISTERED AGENT SIGNATURE</u>

The name and the Florida street address of the registered agent are:

JERMAINE ANDREWS 9625 HAZEL LAKE DR JACKSONVILLE, FLORIDA 32222

Having been named as registered agent 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.,

JERMAINE ANDREWS / Registered Agent's signature

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FIRST SOURCE EQUIPMENT REPAIR, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

JERMAINE ANDREWS

9625 HAZEL LAKE DR

JACKSONVILLE, FLORIDA 32222

MANAGING MEMBER:

BRANDON HIDDEMEN

1500 CALMING WATER DR UNIT 1201

ORANGE PARK, FLORIDA 32003

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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.

JERMAINE ANDREWS

Typed or printed name of signee