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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. Hampton IAN 23 2008

COVER LETTER

Division of Co			
SUBJECT: Fowle	er-Ray Engineering	Contracto	rs, LLC.
JOBBECT.		ed Liability Comp	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing	g.
Please return all corresp	oondence concerning this matt	ter to the following	;
	Arr	old McRay	
		(Name of Person)	
	Fowler-Ray Engi	neering Cor	ntractors, LLC.
	_	(Firm/Company)	
	319	5 NW 19 Cd	ourt
		(Address)	
	Pompano Be	each, Florid	a 33060
,	• (Cit	y/State and Zip Code	e)
For further information	concerning this matter, please	e call:	
	d McRay	at (954	520-8305
(Namo	e of Person)	(Area Cod	e & Daytime Telephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	✓\$130.00 Filing Fee & Certificate of Status	\$155.00 Filir Certified Co (additional cop	py Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exc	ourier Address ion Section of Corporations Building ecutive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DODLOW IS A SAY	
ARTICLE I - Name: The name of the Limited Liability Company is	:
Fowler-Ray Engineerin	a Contractors, LLC.
(Must end with the words "Limited Liabi	<u> </u>
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
315 NW 19 Court	315 NW 19 Court
Pompano Beach, Florida 33060	Pompano Beach, Florida 33060
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registerest business entity with an active Florida registration.) The name and the Florida street address of the	stered Agent. You must designate an individual or another
Arnold McF	Ray
Name	•
315 NW 19	Court
Florida street ad	dress (P.O. Box NOT acceptable)
Pompano Beach, Fl	orida 33060
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

SECRETARY OF STATE DIVISION OF CORPORATIONS

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" = Mar	nager lanaging Member	
MOKM	anaging Member	
MGRM		Randall Fowler
	.	1501 SW 2 Street # 5
		Fort Lauderdale, Florida 33312
MGRM		Gwendolyn McRay
		315 NW 19 Court
		Pompano Beach, Florida 33060
MGRM		Arnold McRay
		315 NW 19 Court
		Pompano Beach, Florida 33060
•		
(Use attachme	nt if necessary)	
LE V: Effective	ve date, if other than th	e date of filing: (OPTIONAL)
ffective date is	listed, the date must	be specific and cannot be more than five business days p
days after the	date of filing.)	
-	-	
DEOLUBED (OLZINIA TELIDIE.	
REQUIRED S	SIGNATURE:	
	()	11 Mcc
	1 1000	ald Miran
	Signature of a memb	per or an authorized representative of a member.
		section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)
		Arnold McDov
		Afficial vicinal
	т	Arnold McRay 'yped 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)