## L08000078046

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
•					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
·					

Office Use Only



700134400977

08/13/08--01012--024 \*\*125.00

SILIOS

08 AUG 13 PH 12: 34
SECRETARY OF STATE
ANASSEE FLORID

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: ARS Energy Services 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:  Anthony Robert Stainback  (Name of Person)  Energy Services LLC  (Firm/Company)  (Firm/Company)  (Address)  Formings  Formings  (City/State and Zip Code)	te 16
For further information concerning this matter, please call:    How Standard Gold	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Lin	e: nited Liability Compa	any is:			
	Energy	Ser	VICES	LLC	) _
(Musi	end with the words "Lindite	ed Liability Compar	ıy, "L.L.C.," o <b>r "L</b> I	LC.")	
ARTICLE II - Add					
The mailing address	and street address of	the principal o	office of the Li	mited Liability	Company is:
Principal Office Ad	ldress:	Mailir	ng Address:	-1	,
1 1 . \		inite /	11	$\langle   \cdot    $	1.

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 Floridal street address of the registered agent are: Florida street address (P.O. Box NOT 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 off my position as registered agent as provided for in Chapter 608, F.S..

Signature (RÉQUIRED)

(CONTINUED) Page 1 of 2

The name and address of each Manag	er or managing member is as follows:
<u>Title:</u> "MGR" = Manager	Name and Address:
MGRM" = Managing Member	Anthonijk Stainback 399 clerk land ave Orange Park Flar 32065
<del></del>	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the	date of filing: 4/1/2008 (OPTIONAL)
(If an effective date is listed, the date must be to or 90 days after the date of filing.)	e specific and cannot be more than five business days prior
REQUIRED SIGNATURE: Signature of a member	r or an authorized representative of a member.
(In accordance with sec of this document consti that the facts stated h	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)