Florida Department of State Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000270215 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

: HUBCO Account Name

Account Number : 104662003400 : (516) 935-3940

Fax Number

: (516)935-3088

FLORIDA/FOREIGN LIMITED LIABILITY CO.

C.W. DiFelice & Sons Plumbing, LLC

	29	EA PA	Certificate of Status	1
			Certified Copy	0
LL		<u> </u>	Page Count	02
	P	등급	Estimated Charge	\$130.00
41	~	J.H.		

A. LUNT

DEC 10 2008

EXAMINER

Corporate Filing Menu

Help

Filing Menu

12/9/2008

H08000270215

ARTICLES OF ORGANIZATION FOR

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: C.W. DiFelice & Sons Plumbing, 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:	Mailing Address:		
702 Willow Drive		<u>-</u>		_
Lehigh Acres, FL 33936	Lehigh Acres, FL 33936			
ARTICLE III - Registered Agen The name and Florida street address of the	nt, Registered Office & Registered Agent's Signature ne registered agent are: Charles W. DiFelice	E P	2008 DEC -9 AM 10: 07	
	Name	DATE	0	-
	702 Willow Drive	1>	7	
	(P.O. Box or Mail Drop Box NOT Acceptable)			
-	Lehigh Acres, FL 33936 (City / State / Zip)			
Waring have ward as a section of the	, ,	2.71 . 7.11s.		
muving usen numea as registerea agei	nt and to accept service of process for the above stated limite	а наошт	y compe	any

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.

X Chailes W. D. Felice

Registered Agent's Signature - Charles W. DiFelice

ARTICLE IV - Manager(s) The name and address of each M	or Managing Member(s): anager or Managing Member is as follows:	H08000270215
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Charles W. DiFelice - 702 Willow Drive, Le	high Acres, FL 33936
(Use attachment if necessary)		
REQUIRED SIGNATURE:		
_	re of a member or authorized representative of a	יירין ויינין
	lance with section 608.408(3), Florida Statutes, the constitutes an affirmation under the penalties of pein are true.)	erjury that the facility
	Charles W. DiFelice	ORIDATE

Typed or printed name of signes