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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only

EFFECTIVE DATE 12/31/08



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 06 2009

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Eagle Plumbing Systems, 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:
Michael J. Leannah
(Name of Person)
Eagle Construction Systems, LLC
(Firm/Company)
12411 Commerce Lakes, Dr., Suite 100
(Address)
Fort Myers, FL 33913
(City/State and Zip Code)
For further information concerning this matter, please call:
Michael J. Leannah (Name of Person) (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & }\times \$
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Eagle Plumbing Systems, L	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
12411 Commerce Lakes Dr., Suite 100 Fort Myers, FL 33913	12411 Commerce Lakes Dr., Suite 100 Fort Myers, FL 33913	
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:	
Michael J. Lean	nah REFAN-	7
	Lakes Dr., Suite 100 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 of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED

City, State, and Zip

EFFECTIVE DATE 12/31/08

ARTICLE I - Name:

The name of the Limited Liability Company is:

(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" = Manag					
"MGRM" = Mar	naging Member				
MGRM		Eagle Construction Systems, LLC			
	_	12411 Commerce Lakes Dr., Suite 10	0		
		Fort Myers, FL 33913			
			 		
		·			
					
	<u> </u>				
(Use attachment	if necessary)				
(Ose attachment	ii necessary)	•			
CLE V: Effective	date, if other than the da	ate of filing: <u>12/31/2008</u> . (OPTIO	NAL)	
effective date is lis	ted, the date must be s	specific and cannot be more than five bu		,	rior
00 days after the da	•	•			
	•				
DECLUSION OF	Carl my man				
REQUIRED SI	GNATURE:				
		1			
	me l	Ol Jan	7 2 2 3 5	9	•
	Signature of a member of	or an authorized representative of a member.		7>	
	/In accordance with costi	on 608.408(3), Florida Statutes, the execution	Ä	Z	(HARRIED)
	of this document constitu	tes an affirmation under the penalties of perjury	SE SE	ပ်	
	that the facts stated her	ein are true.)	ਾਂ ੂ	_D _X	
	Michae	d or printed name of signee	<u>لي ري</u>	÷:	7
	Туре	d or printed name of signee		T. (J)	

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)