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Florida Department of State
Division of Corporations
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L. SELLERS

JAN 28 2009

EXAMINER

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.**ABC SOLAR GREEN POWER INSTALLATION LLC**

Certificate of Status	0
Certified Copy	1
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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ABC SOLAR GREEN POWER INSTALLATION LLC

ARTICLE II - Address:

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

Principal Office Address:

1201 NW. 37 AVE.

CAPE CORAL, FL. 33993

Mailing Address:

1201 NW. 37 AVE.

CAPE CORAL, FL. 33993

ARTICLE III - Registered Agent, Registered office, & Registered Agent's Signature:

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

BERNIE O LUGO

Name

1201 NW. 37 AVE.

Florida street address (P.O. Box NOT acceptable)

CAPE CORAL, FL. 33993

City, State, and Zip Code

Having been named as registered agent and to accept service of process for the above stated limited liability company as 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

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

"MGR"

BERNIE O. LUGO

1201 NW. 37 AVE. CAPE CORAL, FL. 33993

"MGRM"

JACKIE C. LUGO

734 NW. 38 FL. CAPE CORAL, FL. 33993

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

BERNIE O. LUGO

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

FAX COVER SHEET

TO

COMPANY

FAX NUMBER 18506176383

FROM Francyne Carrillo

DATE 2009-01-27 18:21:20 GMT

RE FW: 18506176383

COVER MESSAGE

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Sent: Tuesday, January 27, 2009 11:50 AM

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