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(Requestor's Name)
(Address)
. (Address)
. (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basilioss Elikiy Hallio)
(Document Number)
Pertified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



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SECRETARY OF STATE
TALL AHASSEE, FLORID.

FEB - 5 2009 EXAMINER



January 15, 2009

BRENNON BATTLES 15231 13TH ST NORTH LUTZ, FL 33549

SUBJECT: BATTLES BROTHERS ELECTRIC, LLC

Ref. Number: W09000002241

We have received your document for BATTLES BROTHERS ELECTRIC, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 92 days after the date of filing. Our office received your document on January 14,2009. Please amend your document accordingly.

The Florida Statutes require an entity to designate a street address first principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return your document, along with a copy of this letter, within 60 decircles or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 409A00001608

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Battles Brothers Electric, 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:				
Brennon Buttles				
(Name of Person)				
Dattles Brothers Electric, LLC				
(Firm/Company)				
15231 13th St North				
(Address)				
Lutz Pl 33549				
(City/State and Zip Code)				
(Address) Lutz, F1 33549 (City/State and Zip Code) For further information concerning this matter, please call:				
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)				
(Marie of Ferson) (France Code & Daylante Fersons Named)				
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$\sum \\$130.00 Filing Fee & \$\sum \\$155.00 Filing Fee & \$\sum \\$160.00 Filing Fee,				
Certificate of Status Certified Copy Certificate of Status &				
(additional copy is enclosed) Certified Copy (additional copy is enclosed)				
Mailing Address Street/Courier Address Registration Section Registration Section				
Division of Corporations Division of Corporations				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Battles Brothers Electric; LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "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:
15231 13 STN, Lutz, P2:33549 - P.U. BUX.34/
TE ST
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 prother business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are: Brennin Buttles
15231 1376 St. Worth
Florida street address (P.O. Box NOT acceptable) FL 33549 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

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

The name and address of each Manager or Managing Member is as follows:

	<u>Title:</u> "MGR" = Manager	Name and Address:
	"MGRM" = Managing Member MGR	Brennon Battles 15231 134 St North
	MGRM	Willie A. Battles 1290 NE SRIZI Williston, #2 32696
		TAELAH AHAM
ARTI	(Use attachment if necessary) CLE V: Effective date, if other than the da	te of filling: 1/2/09 .(OPENAL)
(If an		pecific and cannot be more than five business days prior

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.)

Typed 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)