

L09000074942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

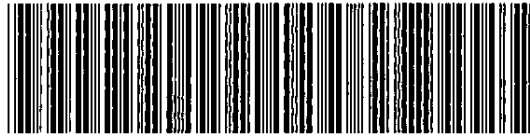
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09 AUG - 4 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

AUG - 5 2009

EXAMINER



a utility service company

300 Scarlet Boulevard, Oldsmar, FL 34677

Tele: 813.891.7960

Fax: 813.854.2140

July 31, 2009

Department of State  
Registration Division  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
09 AUG - 4 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

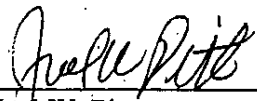
Re: Consent for Use of the Business Name, Utilamax, LLC

To Whom It May Concern:

Utilamax Incorporated, a corporation organized under the laws of the State of Florida, hereby authorizes the limited liability company, Utilamax, LLC, to use the name "Utilamax, LLC" for purposes of formation of a limited liability company in the State of Florida.

Utilamax Incorporated

By: \_\_\_\_\_

  
Joel W. Pitt,  
President

# PEDERSEN & HOUP

August 3, 2009

Victoria L. Kennedy  
Paralegal  
312.261.2532  
Fax 312.261.1532  
vkennedy@pedersenhoupt.com

***Via Federal Express***

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
09 AUG -4 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

***Re: Articles of Organization - Utilamax, LLC***

Ladies/Gentlemen:

I am enclosing the Articles of Organization for the formation of Utilamax, LLC, in duplicate, for filing with your office. Also enclosed is our check made payable to the Florida Department of State in the amount of \$125.00 for filing the Articles of Organization. I am enclosing a self-addressed reply envelope with a request to receive a file-stamped copy of the Articles of Organization.

You will also find enclosed a letter of consent executed by the President of Utilamax Incorporated, a corporation registered with the Florida Secretary of State in good standing. Utilamax Incorporated has granted Utilamax, LLC the authority and consent to use the name Utilamax, LLC to register as a Florida limited liability company.

If you have any questions or comments with regard to the enclosed documents, please feel free to contact me at the information listed above.

Thank you.

Very truly yours,

  
Victoria L. Kennedy

Enclosures

504242.1

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Utilamax, 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:**

300 Scarlet Blvd.

Oldsmar, FL 34677

311 S. Wacker, Suite 5500

Chicago, Illinois 60606

**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 Florida street address of the registered agent are:

Brian LoVetere

Name

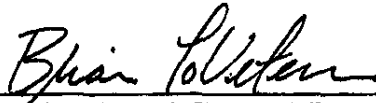
300 Scarlet Blvd.

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

Oldsmar, FL 34677 FL

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)

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TALLAHASSEE, FLORIDA

**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:**

Joseph McInerney - MGR

311 S. Wacker, Suite 5500

Chicago, Illinois 60606

Eric T. Martinez - MGR

311 S. Wacker, Suite 5500

Chicago, Illinois 60606

(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.)

Eric T. Martinez, Manager

Typed or printed name of signer

**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)**