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Certified Copies	. Certificate:	s of Status <u>* * * * *</u>
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T. CLINE
OCT - 8 2009
EXAMINER

COVER LETTER

TO:		ion Section f Corporations		
SUBJ	ECT:		et Maintenance, LLC	D
		Name of Limited L	iability Company	
The en	nclosed Artic	les of Organization and fee(s) are subr	nitted for filing.	
Please	return all co	rrespondence concerning this matter to	o the following:	
	 		an Leahy	
		Nar	ne of Person	
		Florida Asset	Maintenance, LLC	
		Fin	m/Company	
		1465 (Gene Street	
			Address	
		\\/intor E	Park FL 32789	Is G
			ate and Zip Code	F 4-1 C23
		brian.kns@	embargmail.com	130 E 336 A
		E-mail address: (to be used for fu	ture annual report notification)	
For fur	rther informa	tion concerning this matter, please cal	1:	PHIZ:
		Drian I a ab	407	7
		Brian Leahy at ame of Person	(407) 4 Area Code & Daytime Tele	48-2281 ω
			·	•
Enclos	sed is a chec	ck for the following amount:		
] \$125.	.00 Filing F		\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address	Street/Courier Address	
		Registration Section Division of Corporations	Registration Section Division of Corporations	
		P.O. Box 6327	Clifton Building	S

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Florida Asset Mainte	enance, LLC		
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
Florida Asset Maintenance LLC 1465 Gene Street Winter Park FL 32789	Florida Asset Maintenance LLC 1465 Gene Street Winter Park FL 32789		
ARTICLE III - Registered Agent, Registered of the Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another		
Keith N Se	verns S		
Name	The State of the S		
1465 Gene Street			
Florida street address (P.O. Box NOT acceptable)			
Winter Park FL 32789 FL City, State, and Zip			
Having been named as registered agent and to acliability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ened agent as provided for in Chapter 608, F.S		

(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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Keith N Severns 1465 Gene Street	-
	Winter Park FL 32789	•
MGR	Brian C Leahy	_
	1465 Gene Street Winter Park FL 32789	- -
		.
		-
	The con-	- 200 H
(Use attachment if necessary)	A TAS	TOC
CLE V: Effective date, if other than the d	date of filing: 10/7/09 .(OPTIO	NAL)
00 days after the date of filing.)	date of filing: 10/7/09 . (OPTIO specific and cannot be more than five business	
effective date is listed, the date must be 00 days after the date of filing.) REQUIRED SIGNATURE:	specific and cannot be more than five business	davš pri
effective date is listed, the date must be 00 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member	specific and cannot be more than five business or an authorized representative of a member.	davš pri
effective date is listed, the date must be 00 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with section of this document constituted the facts stated here)	specific and cannot be more than five business or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	davš pri
effective date is listed, the date must be 00 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with section of this document constituted that the facts stated here	specific and cannot be more than five business or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	davš pri

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)