1100000009169

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
JAN 2 6 2010				
•				
EXAMINER				

Office Use Only



800163865108

01/22/10--01024--023 **125.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

COVER LETTER

	tration Section on of Corporations	
SUBJECT:	RENEWABLE DESIGN, L Name of Limited Liability Comp	LC
50202011	Name of Limited Liability Comp	pany
The enclosed A	articles of Organization and fee(s) are submitted for filin	ng.
Please return al	l correspondence concerning this matter to the following	g:
	RUTH HAGGERTY	
	Name of Person	SECRE ALLAH
	Firm/Company	ECRETARY OLLAHASSEE,
	840 BEECH RD.	AM IO: 08
	Address	FL 33409
	WEST PALM BEACH City/State and Zip Code rhaggerty 7@ bellsout	
	City/State and Zip Cook	•
	E-mail address: (be be used for future annual rep	v., Nell ort notification)
For further info	rmation concerning this matter, please call:	
RUTH	HAGGERTY at (56) Name of Person Area Code	373-2327 e & Daytime Telephone Number
Enclosed is a	check for the following amount:	
\$125.00 Filin	g Fee \$\int_\$130.00 Filing Fee & \$\int_\$155.00 Filin Certificate of Status Certified Cop (additional copy)	py Certificate of Status &
	Registration Section Registration Division of Corporations P.O. Box 6327 Clifton B Tallahassee, FL 32314 2661 Exe	ourier Address ion Section of Corporations suilding ecutive Center Circle see, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Co	Company is:	
RENEWABLE DE	ESIGN, LLC	
(Must end with the words "	"Limited Liability Company," "L.L.C.," or "LLC.")	•
ARTICLE II - Address: The mailing address and street addre	ess of the principal office of the Limited Liability C	Company is:
Principal Office Address:	Mailing Address:	
840 BEECH RD.	SAME	_
WEST PALM BEACH FL. 33409		, -
	Registered Office, & Registered Agent's Signate as its own Registered Agent. You must designate an individual or and on.)	
The name and the Florida street addre	ress of the registered agent are:	FIL 2010 JAN 22
RUTH	HAGGERTY Name BEECH RD. address (P.O. Box NOT acceptable) BEACH FL 33409	¥ T
	Name SAR	FILE JAN 22 AM
840	BEECH RD.	ED OS
Florida street a	address (P.O. Box NOT acceptable)	ë O
		90
(City, State, and Zip	
Having been named as registered ago	eent and to accept service of process for the above st	nted limited

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 "MGRM" = Managing Member	Name and Address:	2010 JAN 2; SECRETAR TALLAHASS
MGRM	RUTH HAGGERTY 840 BEECH RD WPB FL 33409	N 22 M B: 05 TARY OF STATE ASSEE, FLORID.
EACE TO STREET		7 0
		
(Use attachment if necessary)		
FICLE V: Effective date, if other than the confective date is listed, the date must be 90 days after the date of filing.)	date of filing: $\frac{1/25/2010}{25}$ specific and cannot be more than	
REQUIRED SIGNATURE:		
Signature of a member	orgenty Aran autiforized representative of a m	nember.
(In accordance with sect	ion 608.408(3), Florida Statutes, the executes an affirmation under the penalties of	cution
RUTH HA	CCFRTI	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)