L10000014402

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Certificates of Status					

Special instructions to Filing Officer:

L. SELLERS

FEB - 8 2010

EXAMINER



Office Use Only



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01/25/10--01006--028 **160.00

10 FEB -5 PH 3: 01
SECRETARY OF STATE

COVER LETTER

TO:	Registration Division of C					
SUBJI	ECT:	Uni	ited Meter T echs			
осьо.			ed Liability Company			
The en	closed Articles	of Organization and fee(s) are	submitted for filing.			
Please	return all corres	pondence concerning this matt	er to the following:			
			Jeff Lucas Name of Person			
			Name of Person			
			Firm/Company			
	11634 SW 53 PI					
Address						
			er city, FL 33330			
			y/State and Zip Code			
		E-mail address: (to be used f	nitedutilityservices.com or future annual report notification)			
For fur	ther information	concerning this matter, please	e call:			
		eff Lucas of Person	at (305) 3 Area Code & Daytime Tele	45-5277 phone Number		
Enclos	sed is a check f	or the following amount:				
_		\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)]\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



January 26, 2010

JEFF LUCAS 11634 SW 53 PLACE COOPER CITY, FL 33330

SUBJECT: UNITED METER TECHS

Ref. Number: W10000003871

We have received your document for UNITED METER TECHS and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

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

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 510A00002067

Leslie Sellers Regulatory Specialist II

ARTICLES OF ORGANIZATION FOR	FLORIDA LIMITED LIA	BILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company	is:	
United Meter (Must end with the words "Limited Lia	Techs, LLC	<u>-</u>
	tomey company, 15.15.e., or 15.5e.	· ,
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
11634 SW 53 PI	PO Box 1811	
Cooper City, FL 33330	Dania Beach, FL 3300	
The name and the Florida street address of th Jeff Nar	Lucas	
- · · · · · · · · · · · · · · · · · · ·	SW 53 PI O. Box NOT acceptable)	
Cooper city, FL 3333	0 _{FL}	
City, State		
Having been named as registered agent and a liability company at the place designated is registered agent and agree to act in this capacistatutes relating to the proper and complete accept the obligations of my position as refregistered Agent's Stg	n this certificate, I hereby acc city. I further agree to compl performance of my duties, an egistered agent as provided fo nature (REQUIRED)	eept the appointment as y with the provisions of all ad I am familiar with and

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:

Title:		Name and Address:	
"MGR" = Manag "MGRM" = Mar			
MGR		Jeff Lucas	
		11634 SW 53	
		Cooper City, FL 33330	
			
	<u> </u>		
(II)			
(Use attachment	ir necessary)		
	sted, the date must be :	ate of filing:specific and cannot be more than five	
REQUIRED SI	0,		
<u>REQUIRED</u> SI	\mathcal{L}	(11)	
	Signature of a member	or an authorized representative of a memb	er.
	of this document constitu	on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjoin are true.	ury
	that the facts stated herei	in are a de.,	
		Jeff Lucas ed or printed name of signee	

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

10 FEB -5 PH 3: 01
SECRETARY OF STATE