

L100000030018

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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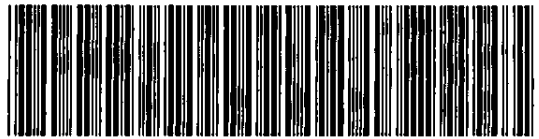
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**A. LUNT**

MAR 18 2010

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LIGHTNING INDUSTRIES, 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:

WILLIAM ROBERT THOMPSON

Name of Person

Firm/Company

1310 SE 33rd Terrace

Address

Gainesville, FL 32641

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Robert Thompson

Name of Person

at ( 352 )

494-9562

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☒ \$130.00 Filing Fee & Certificate of Status    ☐ \$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**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

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

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**ARTICLES OF ORGANIZATION  
OF  
LIGHTNING INDUSTRIES, LLC**

**ARTICLE I - NAME**

The name of the limited liability company is Lightning Industries, LLC, ("company").

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1310 SE 33rd Terrace  
Gainesville, Florida 32641

Mailing Address:

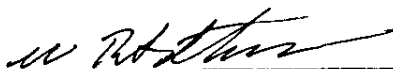
1310 SE 33rd Terrace  
Gainesville, Florida 32641

**ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

William Robert Thompson  
1310 SE 33rd Terrace  
Gainesville, Florida 32641

*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..*

  
\_\_\_\_\_  
William Robert Thompson

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#### ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

"MGMR" = Managing Member

Name and Address:

MGMR

William Robert Thompson  
1310 SE 33rd Terrace  
Gainesville, Florida 32641

**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.)

William Robert Thompson

Typed or printed name of signee

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