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(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:							
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SECRETARY OF STATE

Office Use Only

COVER LETTER

	istration S sion of Co	Section reporations			•		·	
SUBJECT:		Sentech	n A&f	E, LLC				
SOMMET.		Name of Limit	ed List	bility Compo	iny			
The enclosed	Articles o	f Organization and fee(s) are	submit	ted for filing	ş.			
Please return	all corres	oundence concerning this mut	ter to if	te following	:			
		Seneca D. Ho	use					
			Name	of Person				
		Sentech A&E,	LLC					
	Firms Company							
	7342 Via Luria							
	Address							
	Lake Worth, Florida 33467							
	City/State and Zip Code							
		sentech@live.						
For Airther in	វិហារដៅលា	E-mail address: (to be used) concerning this matter, please		e annual reje	र्षा (क्रिशिटवर्गक	m)		
	Seneca D. House at (561) 386-6667							
	Name of Person Area Code & Daytime Telephone Number							
Enclosed is	a check fo	or the following amount:						
□8125.00 Fil	ling Fee	MS130.00 Filing Fee & Certificate of Status	Certified Copy Certificate of cubilitional copy is anclosed; Certified Co			\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circh Tallahassee, Fl. 32301		rele			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Sentech A&E, LLC (Must end with the words "Limited Liability Company, "L.J.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: 7342 Via Luria Lake Worth, FL 33467 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 intelligence business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Seneca D. House Name 7342 Via Luria

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.

City, State, and Zip

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

Registered Agent's Signature (REQUIRED)

Lake Worth, Florida 33467

(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: Title: "MGR" = Manager "MGRM" = Managing Member MGRM Seneca D. House 7342 Via Luria Lake Worth, FL 33467 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (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 penaltics of perjury that the facts stated herein are true.)

Seneca D. House "MGRM"

Typed or printed name of signee

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)