Jivision of Corporations Division of Corporations **Electronic Filing Cover Sheet**

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> > (((H10000076440 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC

Account Number : 120000000019 : (305)552-5973 : (305)220-1440 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. **ENGINEERING-PROCUREMENT & MARKETING** CONSULTING LLC

> Certificate of Status Certified Copy 1 Page Count 03 **Estimated Charge** \$155.00

C. LEWIS

APR 7 2010

EXAMINER

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Fax Server 1/001

April 6, 2010

FLORIDA DEPARTMENT OF STATE

LAZARUS CORPORATE FILING SERVICE, INC.

3052201440

SUBJECT: ENGINEERING- PROCUREMENT & MARKETING CONSULTING LLC

REF: W10000016802

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Suzanne Hawkes Regulatory Specialist II FAX Aud. #: H10000076440 Letter Number: 310A00008352

Registration/Qualification Section

P.O BOX 6327 - Tallahassee, Florida 32314

LAZARUS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H10000076440

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ENGINEERING-PROCUREMENT & MARKETING CONSULTING LLC
(Mast end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

Principal Office Add	ress:	Mailing Address:	•
14146 SW Miami FL	8 TH ST	Same	
ARTICLE III ~ Regi	stered Agent, Registe	red Office, & Registered Agen	it's Signature:
(The Limited Liability Comp business entity with an activ	any cannot serve as its own R e Florida registration.)	ered Office, & Registered Agen legistered Agent. You must designate an in	
(The Limited Liability Comp business entity with an activ	any cannot serve as its own R e Florida registration.) rida street address of the	legistered Agent. You must designate an in	
(The Limited Liability Comp business entity with an activ	any cannot serve as its own Re Florida registration.) rida street address of the FRANCESCO	legistered Agent. You must designate an in	
(The Limited Liability Comp business entity with an activ	any cannot serve as its own Re Florida registration.) rida street address of the FRANCESCO Na	he registered agent are: VITELLA ame	
(The Limited Liability Comp business entity with an activ	any cannot serve as its own Reflorida registration.) rida street address of the FRANCESCO Na 14146 SW	he registered agent are: VITELLA ame	
(The Limited Liability Comp business entity with an activ	any cannot serve as its own Reflorida registration.) rida street address of the FRANCESCO Na 14146 SW	he registered Agent. You must designate an inche registered agent are: VITELLA ame 8 TH ST.	

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)
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ARTICLE IV- Manager(s) or Managing Member(s):

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

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	FRANCESCO VITELLA. 14146 SW 8 # ST. Miami EL 33184
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
CLE V: Effective date, if other that effective date is listed, the date multiple days after the date of filing.) REQUIRED SIGNATURE:	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days pr
Signatura of a m	
(In accordance wi of this document that the facts sta	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.) A TRACESSO Typed or printed name of signee
Filing Fees;	

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

\$ 5.00 Certificate of Status (Optional)

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