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EXAMINER

SCORETARY OF STATE
TALL ANASSEE, FLORIDA

and of

COVER LETTER

TO: Registration : Division of Co		
SUBJECT: Pyramic	d keepSafe Sales & Installation, LLC	
	Name of Limited Liability Company	
The enclosed Articles of	of Organization and fee(s) are submitted for filing.	
Please return all corres	spondence concerning this matter to the following:	
S. Gordon Da	avis, Jr.	
	Name of Person	
Pyramid Mou	uldings Inc.	
	Firm/Company	
4630 County	Road 209 S	
	Address	
Green Cove	Springs, FL 32043	
	City/State and Zip Code ©pyramidmouldings.com E-mail address: (to be used for future annual report notification) a concerning this matter, please call:	
gordondavis@	@pyramidmouldings.com	e sary
	E-mail address: (to be used for future annual report notification)	\$ 1.00 di
For further information	n concerning this matter, please call:	Ę,
0 1 5 1	at (904) 284-5611, ext 123 at (904) Area Code & Daytime Telephone Number	1 181 - 19
Gordon Davis	at (904) 284-5611, ext 123 at (904) Area Code & Daytime Telephone Number	•
Name	Area Code & Daytime Telephone Number	>
Enclosed is a check for	or the following amount:	
□\$125.00 Filing Fee	Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) S160.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company	y is:		
Pyramid keepSafe Sales & Installation	on, LLC		
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the	ne principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
Pyramid keepSafe Sales & Installation, LLC	Pyramid keepSafe Sales & Installation, LLC		
4630 County Road 209 S.	4630 County Road 209 S.		
Green Cove Springs, FL 32043	Green Cove Springs, FL 32043		
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or anothin		
The name and the Florida street address of t	the registered agent are:		
S. Gordon Davis, Jr.	تون و تونید مسلم است سسم است		
N	ame		
4630 County Road 20	9 S.		
Florida stree	t address (P.O. Box NOT acceptable)		
Green Cove Springs.	ы 32043		

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

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:

MGRM	Pyramid Mouldings Inc.	
	4630 County Road 209 S.	
	Green Cove Springs, FL 32043	
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(Use attachment if necessary)		E.FLO

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.)

S. Gordon Davis, Jr.

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)