·L100000 62326

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress) -	-
(Ci	ity/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(В	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status

Special Instructions to Filing Officer:

A. LUNT

JUN 10 2010

EXAMINER

Office Use Only



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2010 JUN -9 PH 2: 4:

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: Spandro				
	Name of Limit	ted Liability Company		
	of Organization and fee(s) are	-		
Please return all corresp	ondence concerning this mat	tter to the following:		
Hugh Gene Y	oung JR			
		Name of Person		
		Firm/Company		
24 Arroyo Pa	rkway			
		Address	anned	
Ormond Bead	ch, FL 32174			
		ty/State and Zip Code	SSYHUTAN SEE SAND	
redalf 462@y			SON I	
		for future annual report notification)	in =	i
For further information	concerning this matter, pleas	e call:		į
Hugh Gene Young	JR	at (386) 214 4003	PM 2: 47	
Name	of Person	Area Code & Daytime Tele		
Enclosed is a check for	or 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 Pagistration Section	Street/Courier Address Payistration Section		

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

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 is	is:	
Spandrel Services, LLC		
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC."	")
ARTICLE II - Address:		Ton Co.
The mailing address and street address of the	principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	AHAS T
24 Алтоуо Parkway		14.55 7.18.5 6
Ormond Beach, FL 32174		m & S
		- S S S S S S S S S S S S S S S S S S S
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the	gistered Agent. You must designate a	gent's Signature
Hugh Gene Young JR		
Nam	ne	
24 Arroyo Parkway		
Florida street a	address (P.O. Box NOT acceptab	le)
Ormond Beach	FL 32174	
City,	State, and Zip	

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)
Page 1 of 2

Title: "MGR" = Manager "MGRM" = Manag		Name and Address:	
MGR	_	Hugh Gene Young JR	
		24 Аггоуо Parkway	
		Ormond Beach, FL	
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			2010 JUN 新聞家
			1-9 888 -9
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(Use attachment if r	necessary)	T.	1 5
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CLE V: Effective dat ffective date is listed days after the date REQUIRED SIGN Si	I, the date must be spot filing.) IATURE: Ignature of a member of a accordance with section	r an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury	•
CLE V: Effective dat ffective date is listed days after the date REQUIRED SIGN Si (I	I, the date must be spot filing.) IATURE: Ignature of a member of this document constitute.	r an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury	•

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)