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Effective Date 07/01/10

06/25/10--01008--024 **125.00

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SECRETARY OF STATI

J. BRYAN

JUN 2 8 2010

EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

SURJECT: SPECIA	ALTY T.I.G. WELDING	LLC	
		ted Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corresp	pondence concerning this mat	ter to the following:	
Marc Lavoie		SECTION OF	<u>.</u>
		Name of Person	
SPECIALTY	T.I.G. WELDING LLC	SSE	л -0
		Firm/Company	主一
1333 BONNE	AU BI/	LORIE	50:
		Address	_
Christmas,Flo	orida. 32709		
	Cit	ry/State and Zip Code	
mlavoie@eild		for future annual report notification)	
For further information	concerning this matter, please		
Marc Lavoie		at (407) 568-8340	
Name	of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount:		
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		72 SE	5 m
The name of the Limited Liability Company is:		CRETA	JE 22
SPECIALTY T.I.G. WELDING LLC		255	2 0 TT
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC	.")	品工厂
		76	PH 1: 04
ARTICLE II - Address:			<u> </u>
The mailing address and street address of the pri	ncipal office of the Lim	ited Liability C	pinpany is:
Principal Office Address:	Mailing Address:		
1333 BONNEAU BL	1333BONNEAU BV		
CHRISTMAS,FL. 32709	CHRISTMAS, FL. 32709		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate	an individual or and	other
The name and the Florida street address of the re	gistered agent are: E	ffective Date	07/10/10
MARC LAVOIE			
Name			
1333 BONNEAU BI			
Florida street addr	ress (P.O. Box NOT acceptal	ble)	
CHRISTMAS	_{FL} 32709		
City, Stat	e, 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

"MGR" = Manager	Name and Address:	SECRETARY OF STATE
"MGRM" = Managing Member		SAS
MGRM	MARC LAVOIE	EE OF
	1333 BONNEAU BL	70
	CHRISTMAS, FLORIDA. 32709	35
MGRM	SARAH LAVOIE	₩.
	1333 BONNEAU BI	
	CHRISTMAS , FL. 32709	
		· · · · · · · · · · · · · · · · · · ·
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