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EXAMINER

COVER LETTER

TO:	Registration S Division of Co						
SHRE	rct. Accurat	e Air Conditioning Co.,	LLC.				
SUBJ	EC1		ted Liability Com	pany			
The en	iclosed Articles of	of Organization and fee(s) are	submitted for fili	ng.			
Please	return all corres	pondence concerning this mat	ter to the following	ng:			
	Michael A. Bo	eniano					
	WICHAEL A. D.	51 IIG 110	Name of Person	·			
	Accurate Air	Conditioning Co., LLC.	r: 10		······		
			Firm/Company				
	7928 SE Sug	ar Pines Way			7ALL SE		
	Address						
		E1 11 004##			CRETARY LAHASS		
	Hobe Sound,		ty/State and Zip Co	de	{1 ~		
	Benigs@bells		y/State and Zip Co	ac .	E TO THE		
	Danida@pena	E-mail address: (to be used	for future annual re	port notification)	<u> </u>		
For fin	ther information	concerning this matter, pleas	e call·		ATE DRIDE		
1 01 141		concerning and matter, proces	o our.		r.		
Michael A. Benigno at (_772)486-7111							
Name of Person				de & Daytime Telep	hone Number		
Enclos	sed is a check for	or the following amount:			,		
□\$ 125.	.00 Filing Fee	□\$130.00 Filing Fee &	■\$155.00 Fili		\$160.00 Filing Fee,		
		Certificate of Status	Certified Copy (additional copy is enclosed)		Certificate of Status & Certified Copy		
			,	,,	(additional copy is enclosed)		
		B.6 - 215 A. J	Ct	5			
		Mailing Address Registration Section		Courier Address ution Section			
		Division of Corporations	Division	n of Corporations			
		P.O. Box 6327 Tallahassee, FL 32314		Building recutive Center C	i-alo		
		i aiiaiiassee, fl 34314	2001 E)	recutive Center C	II C) C		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Accurate Air Conditioning Co. LI (Must end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7928 SE Sugar Pines Way	7928 SE Sugar Pines Way
Hobe Sound, Florida	Hobe Sound, Florida
33455	33455
The name and the Florida street address Michael A. Benigr	교육 _
7928 SE Sugar F	Pines Way
Florid	la street address (P.O. Box NOT acceptable)
Hobe Sound	FL 33455
	City, State, and Zip
liability company at the place desig registered agent and agree to act in thi statutes relating to the proper and co	nt and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all amplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

MGR	Michael A. Benigno	
	<u> </u>	ALTA ALTA
(Use attachment if necessary)		DRIDA DRIDA
LE V: Effective date, if other than the	ate of filing: (OP	TIONAL
fective date is listed, the date must be days after the date of filing.)	pecific and cannot be more than five busin	ess days

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.)

Michael A. Benigno

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)