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BRASS Utilities

547 North Monroe Street Tallahassee, Florida 32301

August 6, 2010

To Whom It May Concern, Enclosed please find a cover letter, Articles of Organization, and a check for \$125.00 for this service.

Please return all correspondence concerning this matter to:

William G. Rollins 547 North Monroe Street, Suite 201 Tallahassee, Florida 32301 brollins@jsna.com 850-222-3975

Sincerely,

William G. Rollins

COVER LETTER

TO:	Registration S Division of Co			
SUBJ	ECT: BRASS	Utilities, L.L.C.		
		Name of Limit	ed Liability Company	7
				6
The er	nclosed Articles o	of Organization and fee(s) are	submitted for filing.	10 AUG
Please	return all corres	pondence concerning this mat	ter to the following:	'n
	William G. Ro	ollins		:
			Name of Person	
	BRASS Utiliti	ies, L.L.C.		
			Firm/Company	
	C 47 N L 4 L N 4 L			
	547 NORTH MIC	onroe Street, Suite 201	Address	
			Audicas	
	Tallahassee,	Florida 32301		
		Cit	y/State and Zip Code	
	brollins@jsna	.com		
		E-mail address: (to be used	for future annual report notification)	
For fu	rther information	concerning this matter, please	e call:	
Willia	ım G. Rollins		at (850) 222-3975	
	Name	of Person	Area Code & Daytime Telephone Number	
Enclo	sed 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 Statu Certified Copy (additional copy is enclosed)	s &
		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 Con	pany is:	1 2 CO
BRASS Utilities, L.L.C.		000
(Must end with the words "Lit	nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	e e e e e e e e e e e e e e e e e e e	>
The mailing address and street address	of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
547 North Monroe Street, Suite 201	Same	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Tallahassee, Florida 32301

William G. Ro	llins
	Name
547 North Mo	nroe Street
F	lorida street address (P.O. Box NOT acceptable)
Tallahassee	FL 32301
	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

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

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

Title: "MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGRM .	
IVIGRIVI	William G. Rollins
	547 North Monroe Street Tallahassee, FL 32301
	I alid idasoo, FL 32301
MGRM	Scott A. Sigler
	547 North Monroe Street
	Tallahassee, FL 32301
	
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(Use attachment if necessary	urv)
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CLE V: Effective date, if of	her than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior
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CLE V: Effective date, if of effective date is listed, the do days after the date of filing REQUIRED SIGNATULES	her than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior ag.) RE: a of a member or an authorized representative of a member.
CLE V: Effective date, if of effective date is listed, the do days after the date of filing REQUIRED SIGNATULE Signature (In accordance of this do	her than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior ag.) RE:
CLE V: Effective date, if of effective date is listed, the do days after the date of filing requirements of the detection of this do that the file.	her than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior ag.) RE: de of a member or an authorized representative of a member. dance with section 608.408(3), Florida Statutes, the execution cument constitutes 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)