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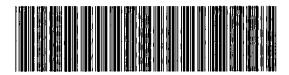
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Special Instructions to F	Filing Officer:			

Office Use Only

S. HAWKES

AUG 1 3 2010

EXAMINER



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S. HAWKES

EXAMINER

S. HAWKES

101/3 2010

EXAMINER

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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 28, 2010

MATTHEW SCREWS 14121 NW 182ND LANE WILLISTON, FL 32696

SUBJECT: MS ENTERPRISES LLC Ref. Number: W10000033214

We have received your document for MS ENTERPRISES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 910A00018252



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 14, 2010

MATTHEW SCREWS 14121 NW 182ND LANE WILLISTON, FL 32696

SUBJECT: MS ENTERPRISES LLC

Ref. Number: W10000033214

We have received your document for MS ENTERPRISES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 910A00017165

COVER LETTER

TO: Registration Division of C			
SUBJECT:	MS Ent	erprises LLC. ted Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this mat	iter to the following:	
	Matthe	Name of Person	
·		Firm/Company	
		• •	
	14121 NM	182nd Lane Address	
		FL 3alale ty/State and Zip Code A yahao · Com for future annual report notification)	
	mls.5654	Wahap Com	
	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, pleas	e call:	
Matthe	Screws of Person	at (352) 317 - 1 Area Code & Daytime Teleph	4756
	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 Cir Tallahassee, FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
ML Screws	LLC
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14121 NW 182nd Lane Williston, FL 32696	14121 NW 182nd Lane Williston, FL 32696
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an individual or another
The name and the Florida street address of the r	egistered agent are:
Matthew So	rews = = =
Name	Sec. in
14121 NW 182"	Lane Egg w
Florida street add	ress (P.O. Box NOT acceptable)
Williston,	FL 32696
City, Sta	ate, 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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing	Member	Name and Address:	D RUG
MGR		Matthew So	rews Fig
		Williston, FL	32194 95
			
			
(Use attachment if nec	•	of filing:	(ODTION
LF V. Effective date i		OI HIME.	(01 11014)
fective date is listed, ti	he date must be spe	ecific and cannot be more	than five business da
fective date is listed, ti days after the date of	he date must be spo filing.)		than five business da
fective date is listed, the days after the date of REQUIRED SIGNAT	he date must be spo filling.) FURE:		
days after the date of REQUIRED SIGNAT Signs (In ac of thi	filing.) FURE: Ature of a member or accordance with section	an authorized representative of 608.408(3), Florida Statutes, the an affirmation under the penalt	f a member.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)