Division of Corporations Electronic Filing Cover Sheet

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TO:

Division of Corporations

Fax Number

: (850)517-6183

From:

Account Name , BATTAGLIA NOSS CORPORATE

Account Number : 12000000003 \$5

. (727)381-aa \$00 Phone Fax Number

: (727)343-4459

Enter the omail address for this business entity to be used for futuennual report mailings. Enter only one pmail address please.

Email Address:

FLORIDA LIMITED LIABILITY CO.

Professional Energy Concepts, LLC

Certificate of Status	0
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Page Count	10
Estimated Charge	\$125,00

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JAN 25 2011

EXAMINER

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ARTICLES OF ORGANIZATION FOR PROFESSIONAL ENERGY CONCEPTS, LLC FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PROFESSIONAL ENERGY CONCEPTS, LLC

ARTICLE II- Address:

The mailing address and Street address of the principal office of the Limited Liability Company is:

<u>Principal Office Address:</u> 6502 28th Ave, E

6502 28th Ave. E Palmetto, FL 34221 Mailing Address: 6502 28th Ave. E. Palmetto, FL 34221

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

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

Ross Montgomery 6502 28th Ave. Fl. Palmetto, FL 34221

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, Florida Statutes.

Registered Agent's Signature

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

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

"MGR" = Manager

"MGRM" = Managing Mcmber

Title:

Name and Address:

Manager

Ross Montgomery 6502 28th Ave. 13.

Palmetto, FL 34221

Manager

Jason Saul

3350 Ulmerton Rd. 321

Clearwater, FL 33762

REQUIRED SIGNATURE:

(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.)

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