# 111000025598

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SECRETARY OF STATE
ALL ARASSET FI ORBITA

B. BOSTICK
MAR - 1 2011
EXAMINER

## **COVER LETTER**

TO: Registratio	n Section Corporations		
SUBJECT: Butle	er Energy Services	s & Technology, LLC	
		ted Liability Company	
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
Yvonne	J Butler		
		Name of Person	
Butler E	Energy Services &		
		Firm/Company	
12412 \$	Sunshine Lane, # 1		
		Address	
Treasure	Island FL 33706		
		ty/State and Zip Code	
<u>yjb@msn</u>		for future annual report notification)	
		•	<b>⊠</b> ≲ <u>1</u>
For further informati	on concerning this matter, pleas	e call:	
Yvonne Butler		at (727) 360-7395	FEB 20
Na	me of Person	Area Code & Daytime Teleph	ione Number
Enclosed is a check	k for the following amount:		STATE
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	
	Registration Section Division of Corporations	Registration Section Division of Corporations	
	P.O. Box 6327	Clifton Building	rala.

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	T - 1	Nai	me:
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The name of the Limited Liability Company is:

## Butler Energy Services & Technology, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

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

Principal Office Addre	ess:	Mailing Address:			
12412 Sunshine Lane		PO Box 8813	1746		
Treasure Island FL 3370	J6	Madeira Beach, FL 33	7.36		
ARTICLE III - Regist (The Limited Liability Compan business entity with an active	y cannot serve as its own Re	red Office, & Registered Agent. You must designate	Agent's Sign an individual o	r anothe	e: er
The name and the Florid	la street address of th	e registered agent are:	AHA	FEB 2	7
Yve	onne J. Butler		SS THE	တ	
	Nar	ne	T.C.	3	Ö
12	412 Sunshine	e Lane	L GR	44:41 HG	- <del></del> -
<del></del>	Florida street	address (P.O. Box NOT accepta	ble) ORIDA	1 #	
Trea	asure Island	<sub>FL</sub> 33706			
<del></del>	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)

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	er en
MGR	Yvonne J. Butler
	12412 Sunshine Lane Treasure Island FL 33706
<del></del>	
	SS 28
	ATE ORID
	——————————————————————————————————————
(Use attachment if necessary)	
•	d to car. March 1 2011 (opgraves)
	nan the date of filing: March 1, 2011 (OPTIONAL) nust be specific and cannot be more than five business days prio
REQUIRED SIGNATURE:	
11	1. OIH

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

#### Yvonne J. Butler

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)