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B. BOSTICK
SEP 6 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: M2 Installation Systems Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Malcolm James Mattice Name of Person
M2 Installation Systems Firm/Coordpany
555 Purdy Lane # A-312 Address
Palm Springs FL. 33461 City/State and Zip Code
MJM1959@SBCGLOBAL, Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Malcolm Mattice at (263) 556 3783 cell Name of Person Area Code & Daytime Telephone Number
561 432 1882 HOME
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$155.00 Filing Fee & \text{Certified Copy}\$\$ (additional copy is enclosed) \$\$160.00 Filing Fee, \text{Certified Copy}\$\$ (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

M2 Installation Systems L.L.C.

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

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individuasiness entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are: Malcolm Mattice Name	SAURLE A	11 SEP 2	E To serve
Florida street address (P.O. Box NOT acceptable) Palm Springs FL 33461 City, State, and Zip	EE, FLORIDA	PH I2: 50	To the dear of the contract of

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:

"MGR" = Manager "MGRM" = Managing Member	,
MGR	Malcolm Mattice
	Palm Springs Fl 33461
	TACE TO
	S
	D
(Use attachment if necessary)	
	e date of filing: (OPTION
Tective date is listed, the date must days after the date of filing.)	be specific and cannot be more than five business da

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.)

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)