12000007831

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:

L. SELLERS

JAN 17 2012

EXAMINER

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12 JAN 13 PM 5.21
SECRETARY OF STATE

COVER LETTER

			ş.
TO: Registration Sec Division of Corp			,
SUBJECT:	Sun Fire Name of Limite	Services, L	LC
The enclosed Articles of 0	Organization and fee(s) are s	ubmitted for filing.	
Please return all correspon	ndence concerning this matte	er to the following:	
Jel	frey D. Se	ler	
	•	Name of Person	
		Firm/Company	
6 V	ia De Casas	Sur # 204	
		Address	
<u> </u>	nton Beac	A FL 3342 State and Zip; Code	26
•	JDRW San	/State and/Zip.Code	
	E-mail address: (to be used for	r future annual report notification)	
For further information co	ncerning this matter, please	call:	
Jeffrey D Name of	Soler Person	at (<u>561</u>) <u>350-1</u> Area Code & Daytime Telep	112 phone Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee		\$155.00 Filing Fee & 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 C Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FI	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	• .
Sun fire Service (Must end with the words "Limited Liabil	es, 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 Principal Office Address:	incipal office of the Limited Liability Company is: Mailing Address:
6 Via De Casas Sur #204 Boynton Beach, FL 32426	Same
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	

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

6 Via De Casas Sur # 204

Boyston Beach FL 33426
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 agents Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILL LU

12 JAN 13 PH 5 2T

SECRETARY OF STATE

Title: "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGR	Jeffrey D. Soler & Via De Casas Sur #26 Byrdon Beach, FL 33426
(Use attachment if necessary)	
· • • • • • • • • • • • • • • • • • • •	than the date of filing: . (OPTION
LE V: Effective date, if other fective date is listed, the date	than the date of filing: (OPTION must be specific and cannot be more than five business d
LE V: Effective date, if other	than the date of filing: (OPTION must be specific and cannot be more than five business d

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)