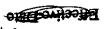
L12000038656

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(org/outo/2/p/ Hollow)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
,						
(Decument Number)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special instructions to 1 ming officer.						

Office Use Only



200224461552



Effective Date 4-1-12

03/16/12--01031--008 **160.00

√SECRETARÝ OF STATE. TALLAHASSEE, ELORIDA

> J. SAULSBERRY EXAMINER

MAR 20 2012

COVER LETTER

то:	Registratio Division of	n Section Corporations		·				
SUBJI	CT.	Stokes Plumbing &	& Mech	nanical S	Servic	es, LL(2	
SUBJI	ECI:	Name of Limi			· · · ·	··········		
The en	closed Article	s of Organization and fee(s) are	submitted	for filing.				
Please	return all corr	respondence concerning this ma	tter to the f	ollowing:				
		Da	aniel B	•				
			Name of F	'erson				
		Stokes Plumbing	& Mec	hanical (Servi	ces, LL	C	
			Firm/Com	ipany				
		2001	7th Ave	enue Nor	th			
			Addre	ss			<u>_</u> _t.	~
		l ake \	Worth	FL 3346	1		ALC SEC	2012 MAR 1
	Lake Worth, FL 33461						R R	
				tokes.com			ARY SSE	6
		E-mail address: (to be used	for future ar	nual report not	ification)			3> 32
For fur	ther informati	on concerning this matter, pleas	se call:				182 183 183 183 183 183 183 183 183 183 183	8: 3 2
	Da	niel Barnes	ai (561 ₎		19-6441	Şiri S	3 2
	Na	me of Person	A	Area Code & Da	ytime Tel	ephone Numb	per	
Enclos	sed is a check	k for the following amount:						
\$125.00) Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certi	.00 Filing Fed fied Copy ional copy is en	_	\$160.00 Certifica Certified (additiona	ite of Sta I Copy	itus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314] 	Street/Courier Registration Se Division of Co Clifton Buildir 2661 Executiv Tallahassee, F	ection orporation ng e Center	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Stokes Plumbing & Mechanical Services 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 Add	dress:	<u>Maili</u>	ng Address:			
2001 7th Ave. North Lake Worth, FL 3346	1		7th Ave. North Worth, FL 33461			
(The Limited Liability Comp business entity with an acti	,	gistered Ager	t. You must designate an indi			
The name and the Fig	rida street address of th Daniel	the registered agent are:		SECR ALLA	2012 MAR 16	ا خور
	Name			N N N N N N N N N N N N N N N N N N N	AR	
	7295 150th Ct. North			SEE	9	; ~~
	Florida street address (P.O. Box NOT acceptable)			E Por S	Je-	3
	Palm Beach Gardens	FL.	33418	TATE	င္ဘာ	
	City, State, and Zip			Dui	<u>ಜ</u> 2	

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:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Mem	iber	
MGR	Daniel Barnes 7295 150th Ct. North	
	Palm Beach Gardens, FL 33418	_
MGRM	Erica Barnes	
	7295 150th Ct. North	
	Palm Beach Gardens, FL 33418	2012
		HAR T
	E. F. C. F.	
	07F	& 32
(Use attachment if necessary	·)	
ARTICLE V: Effective date, if other	· · · · · · · · · · · · · · · · · · ·	FIONAL)
to or 90 days after the date of filing.	e must be specific and cannot be more than five busine)	ss days prior
REQUIRED SIGNATURE	E:	

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.)

Daniel Ira Barnes 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)