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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
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June 12, 2012

ANDREW RASKEN 1521 ALTON RD STE 553 MIAMI, FL 33139

SUBJECT: T3A ENERGY CAPITAL, LLC

Ref. Number: W12000031871

We have received your document for T3A ENERGY CAPITAL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on June 12, 2012. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 012A00016505

COVER LETTER

Registration Section

TO:

| - | Division of Corpo | rations | | | | •• |
|----------------|------------------------------|---|---|--|--|------------------|
| | SUBJECT: T3A Er | nergy Capital, | LLC | | | م |
| | | Name of Limit | ed Liability Compa | ny | | |
| | The enclosed Articles of Or | | _ | | | 12 JUN MII: 15 |
| | Please return all correspond | lence concerning this matt | ter to the following: | : | | |
| | Andrew R | asken | Name of Person | | | |
| | T3A Energ | gy Capital, LL | _ | | | |
| | TOTTETTO | Jy Gapital, EL | Firm/Company < | 2053 | OR KWENT | CTREET |
| | 1501 Alto | n Dd Cuita E | F0. | , W | OR 1946E | |
| | 1321 Allo | n Rd, Suite 5 | Address | MITTI | 11 331 | <u> </u> |
| | | | Addiess | | | |
| | Miami, FL 331 | | | | | |
| | | • | y/State and Zip Code | | | |
| | | n@t3aenergycar E-mail address: (to be used f | | et notification) | | |
| | For further information con | | , | rt nottreation) | | |
| | Andrew Rasken | | _at (305) | 790-505 | | |
| Name of Person | | Area Code | & Daytime Tele | phone Number | | |
| | Enclosed is a check for the | ne following amount: | | | | |
| V | | 130.00 Filing Fee & Certificate of Status | \$155,00 Filing Certified Cop (additional copy | by _ | \$160.00 Filing Certificate of S Certified Copy (additional copy is | tatus & |
| |]]] | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314 | Registration Division of Clifton Bu 2661 Execution | ourier Address on Section of Corporation uilding cutive Center (ce, FL 32301 | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO ARTICLE I - Name: The name of the Limited Liability Company is: T3A Enerd (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 Address: Mailing Address:** 3053 Orange Street 3053 Orange Street Miami, FL 33133 Miami, FL 33133 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Todd Benson Name 3053 Orange Street Florida street address (P.O. Box NOT acceptable) Miami 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:

| "MGR" = Manager | Name and Address: | | | | |
|--|---|--------------------------|--|--|--|
| "MGRM" = Managing Member | | | | | |
| MGRM | BAM Energy Lighting, LLC | BAM Energy Lighting, LLC | | | |
| | 1521 Alton Road, Suite 553 | | | | |
| | Miami, FL 33139 | | | | |
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of Registered Agent \$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

\$125.00 Filing Fee for Articles of Organization and Designation