

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

: (305)633-9696 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. MCD SPRINKLERS, LLC

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Certificate of Status 0 Certified Copy 1 03 Page Count \$155.00 Estimated Charge

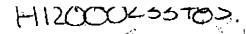
Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa		
	inklers, LLC	
(Mest and with the words "Limite	d Liability Company, "I I C," or "LLC")	
ARTICLE U - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:	
Principal Office Address:	Malling Address:	
178 Hampton Circle	178 Hampton Circle	
Jupiter, FL 33458	Jupiter, FL 33458	
business entity with an active Florida registration)	n Registered Agent You must designate an individual or another	
husiness entity with an active Florida registration) The name and the Florida street address of William F. Serpa,	f the registered agent are:	
husiness entity with an active Florida registration) The name and the Florida street address of William F. Serpa,	f the registered agent are: Jr. Name	
husiness entity with an active Florida registration) The name and the Florida street address of William F. Serpa, 178 Hampton Circ	f the registered agent are: Jr. Name	
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In name and the Florida registration) William F. Serpa, 178 Hampton Circ Florida str. Jupiter Co Having been named as registered agent an liability company at the place designate registered agent and agree to act in this ca	i the registered agent are: Ur. Name Cle cet address (P O. Box <u>NOT</u> acceptable) FL 33458 ity, State, and Zip and to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as spacity. I further agree to comply with the provisions of all	
Ihe name and the Florida registration) William F. Serpa, William F. Serpa, 178 Hampton Circ Florida str. Jupiter Co Having been named as registered agent an liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and complete.	i the registered agent are: Ur. Name Cle cet address (P O. Box <u>NOT</u> acceptable) FL 33458 ity, State, and Zip and to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as	

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Page 1 of 2

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Signature of a member or an	arthorized representative of a member.
• .	•
(In accordance with section 608 408(3), constitutes an affirmation under the pen	Piopida Statutes, the execution of this document
I am aware that any false information su	thies of periury that the facts stated herein are true
constitutes a third degree felony as prov	ulties of perjury that the facts stated herein are true benitted in a document to the Department of State

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