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COVER LETTER

	gistration Section vision of Corporations	
SUBJECT:	Harris LED, LLC	
	Name of Limit	ed Liability Company
The enclosed	d Articles of Organization and fee(s) are	submitted for filing.
Please return	all correspondence concerning this mat	ter to the following:
An	drew C. Bebbington	Name of Person
На	urris Manufacturing, Inc.	•
		Firm/Company
40	35 Reynolds Blvd.	
•		Address
Gre	een Cove Springs, FL 32	043 ty/State and Zip Code
abe	bbington@harrislighting.con	n
	E-mul address: (10 be used	for future annual report notification)
For further in	nformation concerning this matter, pleas	e call:
Laura Fa	anelli	at (904) 284-1220 ext. 283 Area Code & Daytine Telephone Number
	Name of Person	Area Code & Daytine Telephone Number
Enclosed is	s a check for the following amount:	
√ \$125.00 Filid	ng Fee []\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Harris LED, 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 Address:

Mailing Address:

4035 Reynolds Blvd.

Green Cove Springs, FL 32043

4035 Reynolds Blvd.

Green Cove Springs, FL 32043

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company channot 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:

Laura Fañelli

Name

4035 Reynolds Blvd.

Florida street address (P.O. Box NOT acceptable)

Green Cove Springs,

. 32043

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..

egislered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Andrew C. Bebbington
**************************************	4035 Reynolds Bivd.
	Green Cove Springs, FL 32043
-1,	
(Use attachment if necessary) ARTICLE V: Effective date, if other than (If an effective date is listed, the date mus to or 90 days after the date of filing.)	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Bell Bell Bell Bell Bell Bell Bell Bell
	/ /
constitutes an affirmation of a may	608.408(3), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein are true. If it is a document to the Department of State clony as provided for in s.817.155, F.S.) Typed or printed name of signee
	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)