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SECRETARY OF STATE
SECRETARY SEEF, FLORIDA

J. BRYAN

DEC 28 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Air & Marine Air Conditioning LL (Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following: David Mc Introduced Person Name of Person
Air & Marine Air Conditioning TLC
6601 SW 46th st Apt 204
Davie Fl. 33314 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David McIntyre at (954) 297 7072 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee
Mailing Address Registration Section Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:		
Air + Marine Air Conditioning (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:		
6601 SW 46th St APT 204 6601 SW 46+2 st Apt 20 Davie, Fl. 33314		
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.) Effective Date 01/01/13		
The name and the Florida street address of the registered agent are:		
David McIntyre		
6601 SW 46 ⁺¹ S+ Apt 204 Florida street address (P.O. Box NOT acceptable)		
Davie Fl 33314 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)

Page 1 of 2

The name and address of each Manage Title: "MGR" = Manager "MGRM" = Managing Member	n or Managing Member is as follows: Name and Address:
MGR	David McJntyre 6601 SW 46th St Apt 204 Davie Fl. 33314
	THE 26
	PR 2: LA
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the of (If an effective date is listed, the date must prior to or 90 days after the date of filing.)	date of filing: <u>Jav 1, 2013</u> . (OPTIONAL) be specific and cannot be more than five business days
REQUIRED SIGNATURE:	
Signature of a member	or an authorized representative of a member.
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.)

David Mc Trytyre.
Typed or printed name of signed

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)