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COVER LETTER

TO: Registration Section **Division of Corporations**

JMR Refrigeration

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:

Mario Joseph Robinson

Name of Person

JMR Refrigeration

Firm/Company

3208 Triton Circle

Address

Tallahassee, Florida 32312

City/State and Zip Code

imrrefrig@gmaillcom

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mario Joseph Robinson at (850

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

1\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$160.00 Filing Fee, 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

JMR Refrigeration, L.L.C.			
(Must end with the words "Limited !	Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the	ne principal office of the Limited Liabi	lity Company	is:
Principal Office Address:	Mailing Address:		
3208 Triton Circle	3208 Triton Circle		
Tallahassee, Florida 32312	Tallahassee, Florida 32312		
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own Industries and Serve as its own Industries and Serve Industrie	ered Office, & Registered Agent's S Registered Agent. You must designate an individua	ignature: il or another	
(The Limited Liability Company cannot serve as its own I	Registered Agent. You must designate an individua	ignature: al or another	2013
(The Limited Liability Company cannot serve as its own Inbusiness entity with an active Florida registration.) The name and the Florida street address of the Mario Joseph Robinson	Registered Agent. You must designate an individua	ignature: al or another	2013 JA
(The Limited Liability Company cannot serve as its own Inbusiness entity with an active Florida registration.) The name and the Florida street address of the Mario Joseph Robinson	Registered Agent. You must designate an individua the registered agent are:	ignature: al or another	2018 JAN 2
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the Mario Joseph Robinson N 3208 Triton Circle	Registered Agent. You must designate an individua the registered agent are:	ignature: al or another	2018 JAN 29
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the Mario Joseph Robinson N 3208 Triton Circle	Registered Agent. You must designate an individua the registered agent are:	ignature: all or another SEGAST ARY OF S	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the Mario Joseph Robinson Mario Joseph Robinson Note: The Note: The Provide street address of the Mario Joseph Robinson Note: The	Registered Agent. You must designate an individual the registered agent are: lame et address (P.O. Box <u>NOT</u> acceptable)	ignature: al or another SEGATIAN OF STATE TANAMASSEE, FLORI	29

(CONTINUED)

Registered Agont's Signature (REQUIRED)

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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR Mario Joseph Robinson 3208 Triton Circle Tallahassee, Florida 323212 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

(In accordance with section 608.498(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 States constitutes a third degree felony as provided for in s.817.155, F.S.)

Mario Joseph Robinson
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)