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Certified Copies	Certificates of Status	
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SECRETARY OF STAI ALLAHASSEE, FLOR

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J. SAULSBERRY EXAMINER

MAR 1 2013

CORPORATE ACCESS,

"When you need ACCESS to the world"

INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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1.	A & T Electric (CORPORATE NAME AND DOCUMENT#	LLC	ZOI3FEB 28 SELRETARY
 3. 	(CORPORATE NAME AND DOCUMENT #	·)	B M 8 52 8 M 8 52
4.	(CORPORATE NAME AND DOCUMENT #		•
<i>5</i> .	(CORPORATE NAME AND DOCUMENT #)	
6.	(CORPORATE NAME AND DOCUMENT #)	
SPECIA.	L INSTRUCTIONS:		

ARTICLES OF ORGANIZATION OF A & T ELECTRIC, LLC

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I - Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "A & T ELECTRIC, LLC."

ARTICLE II - Address:

The mailing address and street address of the principal office of the Company is:

Mailing Address

4229 Thomas Wood Lane

Winter Haven, FL 33880

Street Address:

4229 Thomas Wood Lane

Winter Haven, FL 33880

ARTICLE III - Registered Agent and Registered Office

The name and the Florida street address of the initial registered agent are:

LESLIE D. ADAMS 4229 Thomas Wood Lane

Winter Haven, FL 33880

ARTICLE IV - Managing Member

Name, Address, Title	Address	Title
Leslie D. Adams	4229 Thomas Wood Lane Winter Haven, FL 33880	Managing Member
Troy A. Tucker	4060 Jennings Road North Haines City, FL 33844	Managing Member

Pursuant to Section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this **20** day of February, 2013.

Signature of authorized representative

LESLIE D. ADAMS

Typed or printed name of signee

(In accordance with Section 608.408(3), <u>Florida Statutes</u>, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

2013FEB 28 AM 84 52
SECRETARY OF STATE
INTO A HASSES OF STATE

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with Section 608.408(3), <u>Florida Statutes</u>, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Signature of Registered Agent LESLIE D. ADAMS

Typed or printed name of signee

SECRETARY OF STATE

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