2/3000/38/07

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COVER LETTER

TO: **Registration Section Division of Corporations**

Counter-Measure and Repair Services LLC

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:

Timothy N Thornton

Name of Person

Counter-Measure and Repair Services LLC	ارس نون • المكار المار • المكار	201
Firm/Company	E.F.	3 SE
18373 Columbine Rd	14.55 14.55	P 25
Address	រុំបណ្ដ	7
Fort Myers, FL 33967		A.
City/State and Zip Code	<u> (13. 27.)</u>	<u>ئ</u>
Tthornton22@gmail.com	, .	
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

Timothy N Thornton

239 , 357-5402

Name of Person

Enclosed is a check for the following amount:

■\$125.00 Filing Fee

□\$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

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address o	f the principal office of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
18373 Columbine Rd	18373 Columbine Rd	
Fort Myers, FL 33967	Fort Myers, FL 33967	
(The Limited Liability Company cannot serve as its ov	istered Office, & Registered Agent's Signature on Registered Agent. You must designate an individual of another	2013 SE
(The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of the company cannot serve as its over business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual or another specific to the registered agent are:	F 25 F
(The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual or another of the registered agent are:	EP 25 M
(The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of the company cannot serve as its over business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual or another of the registered agent are:	EP 25 M .
(The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of the company cannot serve as its over business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual or another of the registered agent are:	EP 25 M
(The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of the Timothy N Thornton 18373 Columbine Rd	wn Registered Agent. You must designate an individual or another of the registered agent are:	EP 25 M Si
(The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of the Timothy N Thornton 18373 Columbine Rd	wn Registered Agent. You must designate an individual or another of the registered agent are:	EP 25 M Si

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..

(CONTINUED)

Page 1 of 2

MGR Timothy N Thornton 18373 Columbine Rd Fort Myers, FL 33967 Position of the control of t	<u>Title:</u>	Name and Address:
**MGRM" = Managing Member MGR		
18373 Columbine Rd Fort Myers, FL 33967 TO SERVE AND THE STATE OF TH	"MGRM" = Managing Member	
18373 Columbine Rd Fort Myers, FL 33967 TO SERVE AND THE STATE OF TH	MGR	Timothy N Thornton
(Use attachment if necessary) LE V: Effective date, if other than the date of filing: 9/20/2013 (OPTION ffective date is listed, the date must be specific and cannot be more than five busin or 90 days after the date of filing.) REQUIRED SIGNATURE:		18373 Columbine Rd
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REQUIRED SIGNATURE:	ffective date is listed, the date mu	ist be specific and cannot be more than five busin
Signature of a member or an authorized representative of a member.	REQUIRED SIGNATURE:	
	Signature of a mem	ber or an authorized representative of a member.
	(In accordance with section 6	08.408(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 an affirmation und	ler the penalties of perjury that the facts stated herein are true.

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)

Timothy N Thornton

Typed or printed name of signee