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2018 DEC 13 PH 2: 57

DEC 16 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Page one electric

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:

		,	
Eugen	e Mcdowell		
- , 		Name of Person	
Place	one electric		
		Firm/Company	
6424 r	1 4 9		17 S 20 23
		Address	3 Q
Tamp	a Fl 33610		EC 13
		ty/State and Zip Code	
eugelect	ric@aol.com		F (2)
	E-mail address: (to be used	for future annual report notification)	2: 57 DRID
For further information	n concerning this matter, please	e call:	7
Eugene M	1cdowell	_at (813) 3619128	
Nan	ne of Person	Area Code & Daytime Telephone	Number
Enclosed is a check	for the following amount:		
■\$125.00 Filing Fee	Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	0.00 Filing Fee, tificate of Status & tified Copy litional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address 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

page one electric L.					
<u> </u>					
,	Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")			
ARTICLE II	Address:				
The mailing add	ress and street address of the p	rincipal office of the Limited I	Liability	Com	pany is
Principal Office	Address:	Mailing Address:			
6424 N 49th Tampa	Florida 33610	6424 N 49 Tampa Florida 33610			
				_	
(The Limited Liability business entity with	Registered Agent, Registered Company cannot serve as its own Register an active Florida registration.) e Florida street address of the Eugene Mcdowell Name		t's Sign: lividual or: SECHE IARY O	another 2013 DEC 13	
	6424 n 49 Tampa Florida			PH	
	Florida street ad	idress (P.O. Box <u>NOT</u> acceptable)	음절	ίμ Ö	
		Tamp _{AL} FI 33610		7	
		tate, and Zip			
	Florida street ac	idress (P.O. Box <u>NOT</u> acceptable) mpa _t Fl 33610	TATE	2: 57	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

EFFECTIVE DATE DIJOH 14

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 "MGRM" = Managing Mem	Name and Address: ber
mgrm	Eugene Mcdowell
	6424 n49 tampa fl 33610
,	
(Use attachment if necessary)	
FICLE V: Effective date, if other on effective date is listed, the date is listed.	r than the date of filing: 01/1/14 (OPTIONAL) ate must be specific and cannot be more than five business of
or to or 90 days after the date of	#1: \
	ming.)
REQUIRED SIGNATURE	## H H + H + H + H + H + H + H + H + H +
	C SEA TO I
	McDand Fin 2 1
Signature of	a member or an authorized representative of a member.
(In accordance with se constitutes an affirma I am aware that any fa	ection 608.408(3), Florida Statutes, the execution of this document atton under the penalties of perjury that the facts stated herein are true. The alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.)
eugene mode	owell
	Typed or printed name of signee

Filing Fees:

prior

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)