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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of	of Status
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Special Instructions to Filing Officer:		

Office Use Only



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Effective Date 1/18/14

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SECRETARY OF SATIONS
DIVISION OF CORPORATIONS
14 JAN 17 AM 8: 05



COVER LETTER

	egistration Section ' ivision of Corporations		
CURIECT	Mighty Ducts, LLC		
Name of Limited Liability Company			
The enclos	ed Articles of Organization and fee(s) are submitted for filing.		
Please retu	rn all correspondence concerning this matter to the following:		
	Ruth Haigh		
	Name of Person		
	Tropical Clean Air, Inc.		
	Firm/Company		
	409 Thumper Thoroughfare		
	Address		
	Key Largo, FL. 33037		
	City/State and Zip Code tropicalcleanair4u@yahoo.com		
	E-mail address: (to be used for future annual report notification)		
For further	information concerning this matter, please call:		
Ruth Ha			
	Name of Person Area Code Daytime Telephone Number		
Enclosed is	s a check for the following amount: ling Fee \$\sim \frac{1}{2}\$\$130.00 Filing Fee & Status Sertificate of Status Certificate of Status & Certificate		

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

14 JAN 17 AM 8: 05



February 5, 2014

RUTH HAIGH 409 THUMPER THOROUGHFARE KEY LARGO, FL 33037

SUBJECT: MIGHTY DUCTS, LLC Ref. Number: W14000004399

We have received your document for MIGHTY DUCTS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 17, 2014. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6951.

JENNA D HARRIS Regulatory Specialist II

Letter Number: 514A00001494

SECRETARY OF STATE DIVISION OF CORPORATIONS



January 23, 2014

RUTH HAIGH 409 THUMPER THOROUGHFARE KEY LARGO, FL 33037

SUBJECT: MIGHTY DUCTS, LLC Ref. Number: W14000004399

We have received your document for MIGHTY DUCTS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 17, 2014. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6951.

JENNA D HARRIS Regulatory Specialist II

Letter Number: 514A00001494

SELVE FAT OF STATION DIVISION OF CORPORATION

Effective Date 1 18 14

ARTICLES OF ORGANIZATIO	IN FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Mighty Ducts, LLC	
(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 Address:	ncipal office of the Limited Liability Company is: Mailing Address:
	·
409 Thumper Thoroughfare Key Largo, FL. 33037	409 Thumper Thoroughfare Key Largo, FL. 33037
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida reg	its own Registered Agent. You must designate an individual
The name and the Florida street address of the re-	gistered agent are:
Ruth Haigh	
	Name
400 Thumper Ther	roughforo

409 Thumper Thoroughfare Florida street address (P.O. Box NOT acceptable)

_{FL} 33037 Key Largo City

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

or

ARTICLE IV- The name and address of	ich person authorized to manage and control the Limited Liability Company:
Title: "AMBR" = Authorized	Name and Address:
ΜGR" = Manager Ruth Haigh	409 Thumper Thoroughfare Key Largo, Fl 33037
Evan S Andros	409 Thumper Thoroughfare Key Largo, FL. 33037
Stephan J Andros	409 Thumper Thoroughfare Key Largo, FL. 33037
	
(Use attachment if nece	y)
	than the date of filing: 1/18/13 (OPTIONAL) e must be specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and the specific an
ARTICLE VI: Other provisions,	у.
<u>REQUIRED</u> SIGNAT	E: Ruth Heizh
(In accorda constitutes I am award	ture of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true. It any false information submitted in a document to the Department of State wird degree felony as provided for in s.817.155, F.S.)
i	h Haigh

Filing Fees:

Typed or printed name of signee

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

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2