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APR 16 2014 APR 14 TH STATE ST



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 4, 2014

DANIEL BROCK 2657 NANCY ST SARASOTA, FL 34237

SUBJECT: BROCK INDUSTRIES LLC

Ref. Number: W14000021644

We have received your document for BROCK INDUSTRIES 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "Ltd.," and "Co."

The document number of the name conflict is K93286.

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) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 014A00007292

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	ECT: Brock Industries LLC Name of Li	mited Liability Company	######################################
The en	closed Articles of Organization and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this r	natter to the following:	
	Daniel Brock	Name of Person	
		Firm/Company	
	2657 Nancy St		201
		Address	2014 MPR 14 PM 3: 2
	Sarasota, Fl 34237		
dh	orock941@gmail.com	City/State and Zip Code	ma T
	E-mail address: (to be use	ed for future annual report notifica	tion) 3: 22
For fur	ther information concerning this matter, ple	ease call:	
<u>Daniel</u>	Name of Person at (407) 766-8035 Area Code Daytime Tel	ephone Number
Enclose	ed is a check for the following amount:		
□ \$125.0	0 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	Street/Courier Addi	ess
	Registration Section Division of Corporations	Registration Section Division of Corporat	ions
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Cent	er Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the L	imited Liability Company is:		
Brock Industries	the Midnight	Industries LL	
	(Must end with the words "Lin	nited Liability Company, "L.L.C.," or	"LLC.")
ARTICLE II - Ac The mailing addre		oal office of the Limited Liability Com	pany is:
Principal Office A	Address:	Mailing Address:	
2657 Nancy St		2657 Nancy St	
Sarasota, Fl 342	237	Sarasota, Fl 34237	
(The Limited Liab another business e		•	
	Daniel Brock		100
	N	lame	TO R
	2657 Nancy St		3: 2 10:24 10:24
	Florida street address (P.O.	Box NOT acceptable)	\$ 6
	Sarasota	FL 34237	
	City	Zip	
the place desig capacity. I furth	nated in this certificate, I hereby a er agree to comply with the provisi	pt service of process for the above state occept the appointment as registered ag- ions of all statutes relating to the prope se obligations of my position as register	ent and agree to act in this er and complete performance

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Daniel Brock
	2657 Nancy St Sarasota, Fl 34237
	Salasola, Fl 34231
	
. .	
(Use attachment if necessary)	
•	filing (OPTIONAL)
CLE V: Effective date, if other than the date of	filing:
CLE V: Effective date, if other than the date of	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 90 days a
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CLE V: Effective date, if other than the date of effective date is listed, the date must be specifite of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.0)	ber or an authorized representative of a member.
CLE V: Effective date, if other than the date of effective date is listed, the date must be specifite of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb (In accordance with section 605.0 constitutes an affirmation under the I am aware that any false information constitutes are the constitutes and the constitutes are the consti	fic and cannot be more than five business days prior to or 90 days a

Page 2 of 2

 $\frac{Filing\ Fees:}{\text{S125.00 Filing Fee}\ for\ Articles\ of\ Organization\ and\ Designation\ of\ Registered\ Agent}$

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)