

L14000067759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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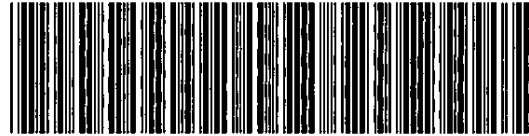
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 25 2014

S. YOUNG

**HALLORAN
& SAGE LLP**
ATTORNEYS AT LAW

SUZANNE M. SCIBILIA Direct 860 704-6868 scibilia@halloran-sage.com
Also admitted in New York and Massachusetts

April 24, 2014

VIA FEDERAL EXPRESS

Attn: Sheila Young
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FL 32301

Re: CES Engineering Services, LLC

Dear Sheila:

Pursuant to your telephone conference with my assistant Audra, regarding the eligibility for our client to use the name of CES Engineering Services, LLC, as a Florida limited liability company, enclosed herewith please find the following documents:

1. Cover Letter
2. One original and one copy of the Articles of Organization for CES Engineering Services, LLC.
3. Check in the amount of \$160.00.

If you have any questions, or further information is required, please feel free to contact me or my assistant Audra Ekstrom at 860-346-8641.

Thank you.

Very truly yours,


Suzanne M. Scibilia

SMS:aje
Enclosures
3307595v.1

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CES ENGINEERING 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:

Suzanne M. Scibilia

Name of Person

Halloran & Sage LLP

Firm/Company

213 Court Street, Suite 205

Address

Middletown, CT 06457

City/State and Zip Code

scibilia@halloransage.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzanne M. Scibilia

Name of Person

at (860) 346-8641

Area Code

Daytime Telephone Number

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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CES ENGINEERING SERVICES, 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 of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

811 Middle Street
Middletown, CT 06457

811 Middle Street
Middletown, CT 06457

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Business Filings Incorporated

Name

515 E. Park Avenue

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee

FL 32301

City

Zip

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..

 Assistant Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Douglas S. Lajoie
811 Middle Street
Middletown, CT 06457

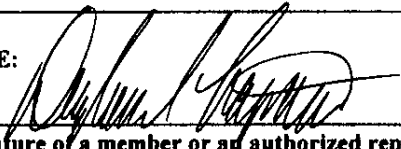
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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 a third degree felony as provided for in s.817.155, F.S.)

DOUGLAS LAJOIE

Typed or printed name of signee

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)

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