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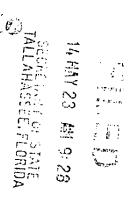
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	:

Office Use Only



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COVER LETTER

TO: Registration Division of C	Section Corporations		
SUBJECT: E&E Sc	Dutions LLC Name of Lin	nited Liability Company	
The enclosed Articles	of Organization and fee(s) ar	re submitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
Ella Mari	e Johnson	Name of Person	
-		Firm/Company	
_4740_Tie	rra Alta Court	Address	
Lakeland	L_FL 33813	ity/State and Zip Code	
huskerwife@ao	l.com E-mail address: (to be used	d for future annual report notifica	ution)
For further information	n concerning this matter, plea	se call:	
Ella Marie Johnson Nan	at (_{ { }	Area Code Daytime Tel	lephone Number
Enclosed is a check fo	or 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 Tailahassee, 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:	·
E&E Solutions LLC (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4740 Tierra Alta Court Lakeland , FL 33813	4740 Tierra Alta Court Lakeland . FL 33813
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:
Ella Marie Johnson	
4740 Tierra Alta Court Florida street address (P.O. Box 1	NOT acceptable)
Lakeland	FL 33813
City	Zip
the place designated in this certificate, I hereby accept t capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r 605, F.S
Registered Agent's Signatur	REQUIRED)
(CONTINUE) Page 1 of 2	D) AHASSET
9.1.1.2	

"AMBR" = Manager AMBR Ella Marie Johnson 4740 Tierra Alta Court Lakeland . FL 33813 AMBR Elden A Johnson 4740 Tierra Alta Court Lakeland . FL 33813 AMBR Elden A Johnson 4740 Tierra Alta Court Lakeland . FL 33813 (Use attachment if necessary) CLE V: Effective date, if other than the date of filing: (OPTIONAL) effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day to of filing.) CLE VI: Other provisions, if any. REOUIRED SIGNATURE: REOUIRED SIGNATURE: REOUIRED SIGNATURE: REOUIRED SIGNATURE: I am aware that any false information submitted in a document to the Department of State constitutes at hird degree felony as provided for in s. 817.155, F.S.) Ella Marie Johnson Typed or printed name of signee Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent Filing Fees:	"AMBR" = Manager AMBR Ella Marie Johnson 4740 Tierra Alta Court Lakeland . FL 33813 AMBR Elden A Johnson 4740 Tierra Alta Court Lakeland . FL 33813 Elden A Johnson 4740 Tierra Alta Court Lakeland . FL 33813 (Use attachment if necessary) CLE V: Effective date, if other than the date of filing: (OPTIONAL) effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days te of filing.) CLE VI: Other provisions, if any. REOUTRED SIGNATURE: REOUTRED SIGNATURE: REOUTRED SIGNATURE: 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.) Ella Marie Johnson Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	Title:		Name and Address:		
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