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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>Harmon Air Conditioning, LLC</u> Name of Li	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	Gary L Harmon, Jr	Name of Person	
	Harmon Air Conditioning LLC	Firm/Company	
	1108 SW 5th St	Address	
	Okeechobee, FL 34974	City/State and Zip Code	
.ba	armonairconditioning@gmail.com E-mail address: (to be use	ed for future annual report notifica	tion)
For fur	ther information concerning this matter, ple	ease call:	
<u>Gary I</u>	Harmon Jr at (Name of Person	863 623-4506 Area Code Daytime Tel	ephone Number
_	ed is a check for the following amount: 0 Filing Fee 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 Addr Registration Section Division of Corporate Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Harmon Air Conditioning, 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 o	trice of the Limited Liability Company is	s:
Principal Office Address:	Mailing Address:	
1108 SW 5th St Okeechobee, FL 34974	Same	
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio	Registered Agent. You must designate a n.)	n individual or
The name and the Florida street address of the registered	agent are:	
Gary L Harmon, Jr Name	·	
1108 SW 5th ST Florida street address (P.O. Box	MOT	
Piorida succi address (P.O. Do)	k MOT acceptable)	
Okeechobee City	FL_34974 Zip	
Having been named as registered agent and to accept se the place designated in this certificate, I hereby accep capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob Chap	ot the appointment as registered agent and of all statutes relating to the proper and c	d agree to act in this complete performance
Gary LA	amort	
Registered Agent's Signa	ture (REQUIRED)	4
(CONTINU	ED)	TASER SECRE 14 SEI
Page 1 of 2	2	

Title:		Name and Address:		
"AMBR" = Authorized N "MGR" = Manager	lember			
AMBR		Gary L Harmon, Jr		
		1108 SW 5th ST		_
•		Okeechobee, FL 34974	•	_
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(Use attachment if necess	ary)			
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