L15000021413

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:)

Office Use Only



200268545522

Effective Date 1/23/15

01/27/15--01003--013 **160.00

TE JAN 27 PH 3: 18
SECRETARS SEE FLORID

FEB = 4 2915

T. HAMPTON

COVER LETTER

TO:	Registration Section Division of Corporations		•
SUBJ	ECT: <u>McPherson Engineering Enterpri</u> Name of Li	ses LLC mited Liability Company	
	nclosed Articles of Organization and fee(s) a	-	
Please	return all correspondence concerning this n	natter to the following:	
	Dale McPherson	N CD	
		Name of Person	
	McPherson Engineering Enterprise	es Firm/Company	
		· ·····	
	1851 Branchwater Trail		· · · · · · · · · · · · · · · · · · ·
		Address	
	Orlando FL, 32825	City/State and Zip Code	
rd.	alemcph@hotmail.com	eny/state and zip code	
<u>.u</u>	E-mail address: (to be use	ed for future annual report notifica	ation)
For tw	rther information concerning this matter, ple	ease call:	
Dale I	McPherson at (407) 433-5901	
	Name of Person		lephone Number
Enclos	ed is a check for the following amount:		
□ \$125.0	00 Filing Fee \$\times \text{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 Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	tions ter Circle

Effective Date 1/23/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
•	
McPherson Engineering Enterprises 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	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Dale McPherson	Dale McPherson
1851 Branchwater Trail	1851 Branchwater Trail
Orlando FL, 32825	Orlando FL, 32825
ADTICLE III Desistant Agent Desistant Office &	Donistand America Simonton
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R	
another business entity with an active Florida registration.	
•	
The name and the Florida street address of the registered a	gent are:
Jennifer McPherson	
Name	
•	
1851 Branchwater Trail	NAME AND ADDRESS OF THE PARTY O
Florida street address (P.O. Box I	NOT acceptable)
Orlando	FL 32825
City	Zip
	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
	nh(1)
Variable of	Chan so
Pagistured Manut's Signatur	- (BROTHBED)
Registered Agent's Signatu	ic (NEQUINED)
\bigcup	
CONTINUE	ומ

Page 1 of 2

15 JAN 27 PM 3: 18
SECRETARY OF STATE

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
CEO	Dale McPherson
	1851 Branchwater Trail
	Orlando FL, 32825
<u>CFO</u>	Jennifer McPherson
	1851 Branchwater Trail
	Orlando FL, 32825
	•
	1000 - 10
(Use attachment if necessary)	
•	
CLE V: Effective date, if other than the da	ate of filing: <u>01/23/2014</u> . (OPTIONAL)
ICLE V: Effective date, if other than the date effective date is listed, the date must be	ate of filing: <u>01/23/2014</u> . (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the date effective date is listed, the date must be	ate of filing: <u>01/23/2014</u> . (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the date effective date is listed, the date must be ate of filing.)	ate of filing: 01/23/2014 (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the date effective date is listed, the date must be ate of filing.)	ate of filing: 01/23/2014 (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the date effective date is listed, the date must be ate of filing.)	ate of filing: <u>01/23/2014</u> . (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the date effective date is listed, the date must be ate of filing.)	ate of filing: 01/23/2014 (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the date effective date is listed, the date must be ate of filing.) ICLE VI: Other provisions, if any.	ate of filing: 01/23/2014 (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
CLE V: Effective date, if other than the de effective date is listed, the date must be ate of filing.)	ate of filing: 01/23/2014
CLE V: Effective date, if other than the de effective date is listed, the date must be ate of filing.) CLE VI: Other provisions, if any.	ate of filing: 01/23/2014
ICLE V: Effective date, if other than the date effective date is listed, the date must be ate of filing.) ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a r	specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the date effective date is listed, the date must be ate of filing.) ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a regular of a regular content of the section of the s	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
ICLE V: Effective date, if other than the date of filing.) ICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a reconstitutes an affirmation under the constitutes are af	specific and cannot be more than five business days prior to or 90 day

Page 2 of 2

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

\$ 5.00 Certificate of Status (Optional)

Filing Fees:

Typed or printed name of signee

SECRETARY OF STATE