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(Re	equestor's Name)	
(Ac	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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FEB'1'3 2015 J. BRUCE

COVER LETTER

	tion Section of Corporations				
SUBJECT: <u>Star</u>	nton Energy Code Services. L Name of Lin	LC mited Liability Company			
The enclosed Artic	cles of Organization and fee(s) a	re submitted for filing.			
Please return all co	orrespondence concerning this m	natter to the following:			
Ann S	Stanton	Name of Person			
Stante	on Energy Code Services, LL	С			
		Firm/Company			
<u>147 V</u>	Vhite Oak Drive	Adl			
		Address			
Crawl	ordville, FL 32327				
<u> Olawi</u>		City/State and Zip Code			
A2stanton@	aol.com			2015 FALI	
<u> </u>	E-mail address: (to be use	d for future annual report notific	ation)	\$ 5 m	
For further inform	ation concerning this matter, ple	ase call:		が 経済と 日本の	CISATI PROCA
				SSE &	
Ann Stanton	at (850) 926-3389		PA PA	
	Name of Person		lephone Number	STATE STATE	
Enclosed is a chec	k for the following amount:			,	
☑ \$125.00 Filing Fe	e \$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Certified Cop (additional copy	Status & y)
]	Mailing Address	Street/Courler Add	<u>ress</u>		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:				
Stanton Energy Code Services, LLC (Must end with the words "Lim	ited Liability Company, "L	.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Lia	bility Company is:		
Principal Office Address:	Mailing Address:			
147 White Oak Drive Crawfordville, L 32327	147 White Oak Dr Crawfordville, FL		<u> </u>	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its of another business entity with an active Florida register.) The name and the Florida street address of the register.	own Registered Agent. You ation.)		dividual or	
Ann Stanton				
	ame			
147 White Oak Drive Florida street address (P.O.	Box <u>NOT</u> acceptable)			
<u>Crawfordville</u> City	FL 32327 Zip			
	scept the appointment as reg ons of all statutes relating to	gistered agent and agr the proper and comp	ree to act in plete perform	this nance
Noglishi u a i	B		4 ~ 3	
(CONTI		F**	2015 FEB	T
Page 1	of 2		EB-6 PM 3: 44	

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Gregg Stanton
	147 White Oak Drive
	Crawfordville, FL 32327
	-

(Use attachment if necessary) EV: Effective date, if other than the date ective date is listed, the date must be spen of filling.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 d
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