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(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:	Registration Division of (n Section Corporations		
SUBJI	ECT: <u>Profile</u>	Light Gauge Structures, L Name of Lir	LC nited Liability Company	
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	atter to the following:	
	<u>Christiar</u>	Troll	Name of Person	
	Profile L	ight Gauge Structures, LL0	C Firm/Company	
	5120 La	ke Washington Rd	Address	
	<u>Melbourr</u>	ne Florida 32934 C	City/State and Zip Code	
joj	ycemcmillin@	omail.com E-mail address: (to be use	d for future annual report notifica	ation)
For fur	ther informatio	on concerning this matter, plea	ase call:	
Christ	ian Troll Nan	at (;	321) 288-4668 Area Code Daytime Te	lephone Number
Enclose	ed is a check fo	or the following amount:		
□ \$ 125.0	0 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Basila Links Course Structures 11 C		
Profile Light Gauge Structures, LLC (Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC."	<u> </u>
(Must clid with the words Elimb	ed Diability Company, L.E.C., or LEC.	,
ARTICLE II - Address:		
The mailing address and street address of the principal	office of the Limited Liability Company is	:
Principal Office Address:	Mailing Address:	
5120 Lake Washington Rd	5120 Lake Washington Rd	
Melbourne, Fl 32934	Melbourne, FI 32934	
		
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its ow another business entity with an active Florida registrat	vn Registered Agent. You must designate ar	n individual or
The name and the Florida street address of the register	ed agent are:	<u> </u>
· ·	ed agent are:	2015 FI SLEAN TALLA
The name and the Florida street address of the register <u>Joyce Troll</u> Name		
Joyce Troll Nan	ne	
Joyce Troll Nam 730 E. Strawbridge Ave. su	ne uite 200	FILE FB 18
Joyce Troll Nan	ne uite 200	FILE FB 18
Joyce Troll Nan 730 E. Strawbridge Ave. su Florida street address (P.O. B	ne uite 200 ox <u>NOT</u> acceptable) FL 32901	FILE FB 18
Joyce Troll Nan 730 E. Strawbridge Ave. su Florida street address (P.O. B	ne uite 200 ox <u>NOT</u> acceptable)	FILE FB 18 MIXSSE

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Christian Troll
	5120 Lake Washington Rd
	Melbourne, FI 32934
ective date is listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 d
E V: Effective date, if other than the date	e of filing: (OPTIONAL) Decific and cannot be more than five business days prior to or 90 d
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