## L1500042881

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Cartificatos	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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FILED

2015 FEB 27 PH 2: 51

SECRETARY OF SHARE

## **COVER LETTER**

TO: Registration of	on Section Corporations		
SUBJECT:	Beacon Nat	ited Liability Company	LLC
	Name of Em	nica Elabinty Company	
The enclosed Article	es of Organization and fee(s) are	e submitted for filing.	
Please return all con	respondence concerning this ma	atter to the following:	
-	Bryan i	Sore Sky Name of Person	
	f	Name of Person	
<u> </u>			
		Firm/Company	
	2707 E. Gra.	Address	rcle # 1433
		Address	
<del></del>	Clearwater	FL 33759 ty/State and Zip Code	
	Ci	ty/State and Zip Code	
	E-mail address: (to be used	Yahoo, com I for future annual report notifica	ation)
For further informati	on concerning this matter, plea	-	
Dryan	Sorosky at (	321 837-9 Area Code Daytime Te	724
ins.	une of Person	Area Code Daytime Te	lepnone Numoer
Enclosed is a check	for the following amount:		
3 \$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)
	ailing Address gistration Section	Street/Courier Add	ress
Di	vision of Corporations	Division of Corporat	ions

P.O. Box 6327 Tallahassee, FL 32314

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:	
Beacon National Supply, LLC  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
(Musi tha with the words Diffined Diability Company, E.E.C., of EEC.)	
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
21967 US Hwy 19 N 21967 US Hwy 19 N Clearwater, FL 33759 Clearwater, FL 33759	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	
The state of the state of the contract of the state of th	[]
The Bryan Company, LLC Name	
101 Ocean Bluffs Blud #702	-
Florida street address (P.O. Box NOT acceptable)	
Tup: ter FL 33477 City Zip	
City Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Bryan Borosky
	Divace (5 0103 KC-)
·	
<del>,</del>	
	<del></del>
(Use attachment if necessary)	
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Filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a membe  (In accordance with section 605.02)	er or an authorized representative of a member.
E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a membe  (In accordance with section 605.02 constitutes an affirmation under the	er or an authorized representative of a member.  03 (1) (b), Florida Statutes, the execution of this document are penalties of periury that the facts stated herein are true
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ARTICLE IV-