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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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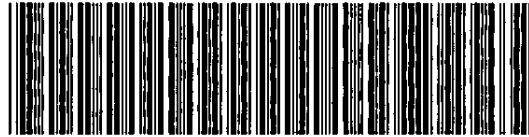
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 FEB 27 PM 2:54
SEC. CLERK OF STATE
TALLAHASSEE, FLORIDA

N. Culligan MAR 10 2015

Design/Build, Inc.
10792 El Paraiso Place
Delray Beach, Florida 33446
jimbres@bellsouth.net
561.702.0981

February 24, 2015

Florida Department Of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Subject: Authorization to use name

Attention: To Whom It May Concern

Please find enclosed "Articles Of Organization For Florida Limited Liability Company", filed by John S. Imbres, as manager of Design / Build, LLC.

I am the president of Design/Build, Inc., and therefore give full authorization for the use of the name Design / Build, LLC.

If you have any questions whatsoever, please call John Imbres at 561.702.0981.

Sincerely,

A handwritten signature in black ink, appearing to read "Susan K. Imbres", with a long horizontal flourish extending to the right.

Susan K. Imbres
President

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Design / Build, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John S. Imbres, Sr.

Name of Person

Design / Build, Inc.

Firm/Company

10792 El Paraiso Place

Address

Delray Beach, Florida 33446

City/State and Zip Code

jimbres@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John S. Imbres

Name of Person

at (561) 702-0981

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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)

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Design / Build, 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 office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

10792 El Paraiso Place
Delray Beach, Florida 33446

10792 El Paraiso Place
Delray Beach, Florida 33446

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 name and the Florida street address of the registered agent are:

John S. Imbres, Sr.

Name

10792 El Paraiso Place

Florida street address (P.O. Box **NOT** acceptable)

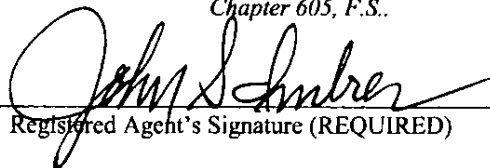
Delray Beach

FL 33446

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)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

"MGR"

Name and Address:

John S. Imbres, Sr.

10792 El Paraiso Place

Delray Beach, Florida 33446

"AMBR"

Matthew C. Imbres

10792 El Paraiso Place

Delray Beach, Florida 33446

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

John S. Imbres

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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DEPT. OF STATE
TALLAHASSEE, FLORIDA