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MILED 2015 FEB 27 PH 2: 54 SLC STAKT OF STATE Design/Build, Inc. 10792 El Paraiso Place Delray Beach, Florida 33446 <u>jimbres@bellsouth.net</u> 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,

Susan K. Imbres

President

## **COVER LETTER**

TO: Registration Division of	n Section Corporations		
SUBJECT: <u>Design</u>	/ Build, LLC Name of Lin	mited Liability Company	<del>.</del>
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	natter to the following:	
John S.	Imbres, Sr.	Name of Person	
<u>Design /</u>	Build, Inc.	Firm/Company	<u> </u>
10792 E	l Paraiso Place	Address	
<u>Delray B</u>	each, Florida 33446	City/State and Zip Code	
jimbres@bellso	uth.net E-mail address: (to be use	d for future annual report notifica	ation)
For further information	on concerning this matter, plea	ase call:	
John S. Imbres Nan	at ( !	561 ) 702-0981 Area Code Daytime Te	lephone Number
Enclosed is a check for	or 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)
Ma	lling Address	Street/Courier Add	ress

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 1 - Name: The name of the Limited Liability Company is:		
Design / Build, LLC	11:17: 0	
(Must end with the words "Limite	d 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	10792 El Paraiso Place	
Delray Beach, Florida 33446	Delray Beach, Florida 33446	<del></del>
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.)	n Registered Agent. You must designate an ind	ividual or
The name and the Florida street address of the registere	d agent are:	2015
John S. Imbres, Sr.		超型
Nam	ne	50° 2
10792 El Paraiso Place		一篇三四
Florida street address (P.O. Bo	ox <u>NOT</u> acceptable)	
Delray Beach	FL <b>33446</b>	22 (0
City	Zip	\$ <b>5</b>
Having been named as registered agent and to accept so	ervice of process for the above stated limited lia	bility company at

Chapter 605, F.S.

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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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)	<u>Title:</u>		Name and Address:		
"AMBR"  John S. Imbres, Sr.  10792 El Paraiso Place Delray Beach, Florida 33446  "AMBR"  Matthew C. Imbres 10792 El Paraiso Place Delray Beach, Florida 33446  "AMBR"  (Use attachment if necessary)  E V: Effective date, if other than the date of filing:  (OPTIONAL)  ective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  (In accordance with section \$65.0203 (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)	"AMBR" = Authorized	d Member			
10792 El Paraiso Place   Delray Beach, Florida 33446     Matthew C. Imbres   10792 El Paraiso Place   Delray Beach, Florida 33446     Delray Beach, Florida 33446     Use attachment if necessary)	"MGR" = Manager				
Delray Beach, Florida 33446     Matthew C, Imbres   10792 El Paraiso Place   Delray Beach, Florida 33446     Delray Beach, F	"MGR"	_	John S. Imbres, Sr.		
Matthew C. Imbres 10792 El Paraiso Place Delray Beach, Florida 33446  (Use attachment if necessary)  E V: Effective date, if other than the date of filing:					
(Use attachment if necessary)  E. V: Effective date, if other than the date of filing:			Delray Beach, Florida 33446		
(Use attachment if necessary)  E. V.: Effective date, if other than the date of filing:	"AMBR"	_	Matthew C. Imbres		
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ARTICLE IV-