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Certified Copies	_ Certificates	of Status
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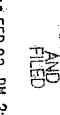
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COVER LETTER

SUBJECT:	TO: Registration Section Division of Corporations
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: John E. KROBATSCH Name of Person Firm/Company 1571 S.W. 3 ** ST. Address Pompano Beh. FL 33069 City/State and Zip Code KROBPOS PI UMBING® GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John KROBATSCH at (954) 931-9453 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee \$155.00 Filing Fee \$\infty\$	SUBJECT: JDKROBros LLC
Please return all correspondence concerning this matter to the following: John E. Krobatsch Name of Person	Name of Limited Liability Company
Firm/Company 1571 S.W. 3° ST. Address Pompane Beh. FL 33069 City/State and Zip Code KROBROS PI Umbing@GMail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Krobatsch at 984 931-9453 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: [\$125.00 Filing Fee \$ \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee,	The enclosed Articles of Organization and fee(s) are submitted for filing.
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Firm/Company 1571 S.W. 3 ST. Address Pompane Beh. FL 33069 City/State and Zip Code KROBros Plumbing@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Kroßatsch at 954 931-9453 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: [\$125.00 Filing Fee \$130.00 Filing Fee \$155.00 Filing Fee \$155.00 Filing Fee,	JOHN E. KROBATSCH
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Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$\frac{130.00 Filing Fee & \frac{160.00 Filing Fee}{155.00 Filing Fee}}\$	For further information concerning this matter, please call:
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\$125.00 Filing Fee \$ \$130.00 Filing Fee & \$160.00 Filing Fee,	Name of Person Area Code Daytime Telephone Number
	Enclosed is a check for the following amount:
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy

Mailing Address

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

Street Address

New Filing 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:

16 FEB 22 PM 2: 41

JDKROBrosLLC.

(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:

54 3 57

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 THE PLUMBER INC.

1571 SW 3 ST

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

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..

(CONTINUED)

Page 1 of 2

APPLICATE

"MGR" = Manager	Name and Address: SECRETARY OF STALLAHASSEE ROR JOHN & KROBATSCH 510 SE 16 AVE
MGR	POMPANO BUL FL 33060 DAVID G KROBATSCH 1248 NE 28 AV POMPANO BUL FL 33062
(Use attachment if necessary)	
n effective date is listed, the date must be specific late of filing.) e: If the date inserted in this block does not meet	iling: (OPTIONAL) c and cannot be more than five business days prior to or 90 days afte the applicable statutory filing requirements, this date will not be listed
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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)