Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160001833023)))



H180001833023ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : HARRY G. REID, III

Account Number : I20010000189
Phone : (407)321-3911
Fax Number : (407)321-1467

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: 019+5+C yehoo.com

FLORIDA LIMITED LIABILITY CO.

Big O Industries, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

30 :01 III 9/19 9:

6 MIG 11 AND CONTROL

Electronic Filing Menu

Corporate Filing Menu

Help

more

(((H160001833023)))

ARTICLES OF	ORGANIZATION FOR	FLORIDA LIMITE	D LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability	Company is:		
Big O Industries, LLC (Must end w		Liability Compa	ny, "L.L.C.," or "LL.C.")
ARTICLE II - Address: The mailing address and street ad-	dress of the principal o	office of the Limite	ed Liability Company is:
Principa	Office Address:		Mailing Address:
1913 Glen Mist Cove Longwood, Florida 33	750		vi3 Glen Mist Cove ongwood, Florida 32750
ARTICLE III - Registered Ager (The Limited Liability Company another business entity with an ar- The name and the Florida street a	cannot serve as its own the florida registration delease of the registered	n Registered Agent on.)	ent's Signature: t. You must designate an individual or
	Olaf J. Stenger	Name	
	1913 Glen Mist Cov Florida strest addres	¢	acceptable)
	Longwood	Florida	32750
	City	State	Zip
			at a the base of t

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 occept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page I of 2

(((H160001833023)))

AMBR" = Authorized Member	Name and Address:
MGR" • Manager	
MGR	Olaf J. Stenger
	_1913 Glen Mist Cove
	Longwood, Florida 32750
	· · · · · · · · · · · · · · · · · · ·
Use attachment if necessary)	
tive date is listed, the date must be specif filing.)	Sling: (OPTIONAL) ic and cannot be more than five business days prior to or 90 the applicable stanutory filing requirements, this date will not
rtive date is listed, the date must be specif 'Gling.') he date inserted in this block does not mee ent's effective date on the Department of S	ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not
rtive date is listed, the date must be specififiling.) he date inserted in this block does not meetent's effective date on the Department of S. VI: Other provisions, if any.	ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not state's records.
rtive date is listed, the date must be specififiling.) he date inserted in this block does not meetent's effective date on the Department of S. VI: Other provisions, if any.	ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not state's records.
rtive date is listed, the date must be specififiling.) he date inserted in this block does not meetent's effective date on the Department of S. VI: Other provisions, if any.	ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not state's records.
tive date is listed, the date must be speciff filing.) he date inserted in this block does not meetent's effective date on the Department of S. VI. Other provisions, if any.	ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not state's records.
tive date is listed, the date must be specif filing.)	ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not state's records.
tive date is listed, the date must be specificing.) he date inserted in this block does not meetent's effective date on the Department of St. VI: Other provisions, if any. REOUTRED SIGNATURE: Signature of a meeting	ic and cannot be more than five business days prior to or 90 to the applicable statutory filing requirements, this date will not state's records.
tive date is listed, the date must be specificing.) he date inserted in this block does not meetent's effective date on the Department of St. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a meeting this document is executed.	it the applicable statutory filing requirements, this date will not state's records. The opticable statutory filing requirements, this date will not state's records. The opticable statutory filing requirements, this date will not state's records.
rive date is listed, the date must be specificing.) the date inserted in this block does not meet ent's effective date on the Department of St. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a meeting of an aware that any false in	the applicable statutory filing requirements, this date will not state's records. State's records. Deer or an applicative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State
tive date is listed, the date must be speciffiling.) he date inserted in this block does not meetent's effective date on the Department of St. VI: Other provisions, if any. REOURED SIGNATURE: Signature of a meeting of an aware that any false in	it the applicable statutory filing requirements, this date will not state's records. The opticable statutory filing requirements, this date will not state's records. The opticable statutory filing requirements, this date will not state's records.
tive date is listed, the date must be specifiling.) ne date inserted in this block does not meetent's effective date on the Department of S. VI: Other provisions, if any. ECOURED SIGNATURE: Signature of a meete This document is executed I am aware that any false in constitutes a third degree fe	the applicable statutory filing requirements, this date will not state's records. Deer or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.
tive date is listed, the date must be specifiling.) he date inserted in this block does not meetent's effective date on the Department of S. VI: Other provisions, if any. EOUTED SIGNATURE: Signature of a meete This document is executed I am aware that any false in constitutes a third degree fe	the applicable statutory filing requirements, this date will not state's records. State's records. Deer or an applicative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State
tive date is listed, the date must be specifiling.) he date inserted in this block does not meetent's effective date on the Department of S. VI: Other provisions, if any. EOUTED SIGNATURE: Signature of a meete This document is executed I am aware that any false in constitutes a third degree fe	the applicable statutory filing requirements, this date will not state's records. Deer or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.
tive date is listed, the date must be specificing.) he date inserted in this block does not meetent's effective date on the Department of St. VI: Other provisions, if any. REOUTED SIGNATURE: Signature of a meeting that is executed I am aware that any false in constitutes a third degree for Olaf J. Stenger	the applicable statutory filing requirements, this date will not state's records. The applicable statutory filing requirements, this date will not state's records. The or or an applicable representative of a member, in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.

Page 2 of 2