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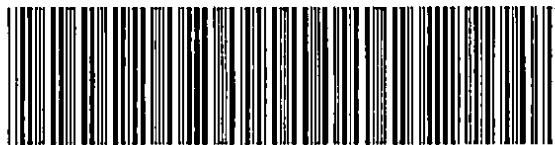
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DATE: 1/29/19

NAME: PROFESSIONAL EXTERIOR SOLUTIONS LLC

TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:
PROFESSIONAL EXTERIOR SOLUTIONS LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

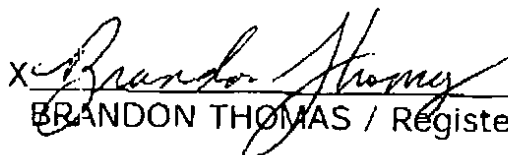
7325 HOLLY STREET
MOUNT DORA, FLORIDA 32757

ARTICLE III REGISTERED AGENT

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

BRANDON THOMAS
7325 HOLLY STREET
MOUNT DORA, FLORIDA 32757

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.

x 

BRANDON THOMAS / Registered Agent's signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV AUTHORIZED PERSON(S)

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

AUTHORIZED MEMBER

BRANDON THOMAS

7325 HOLLY STREET

MOUNT DORA, FLORIDA 32757

.....

X  _____
BRANDON THOMAS Authorized Representative's signature

(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.)

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19 JAN 29 AM 9:11
STATE OF FLORIDA
DEPARTMENT OF STATE