

L19000185243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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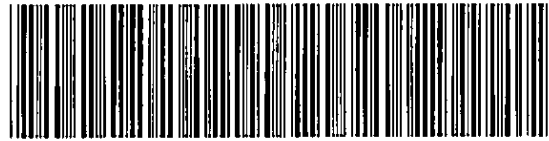
(Business Entity Name)

(Document Number)

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19 JUL 31 PM 2:01

FILED
19 JUL 31 AM 10:04
U.S. DISTRICT COURT
DISTRICT OF COLUMBIA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 865764 4312599
AUTHORIZATION :
COST LIMIT : \$125.00

ORDER DATE : July 30, 2019
ORDER TIME : 10:26 AM
ORDER NO. : 865764-005
CUSTOMER NO: 4312599

DOMESTIC FILING

NAME: PRESTO DISTRIBUTION, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION

OF

PRESTO DISTRIBUTION, LLC

July 30, 2019

The undersigned hereby certifies the following for purposes of forming a limited liability company under the laws of the State of Florida. The following Articles shall be the charter and authority for the conduct of business of such limited liability company.

ARTICLE I

NAME:

The name of the limited liability company (the "Company") is Presto Distribution, LLC.

ARTICLE II

ADDRESS:

The mailing address and street address of the Company's principal office is 3400 Cumberland Boulevard Southeast, Atlanta, GA 30339.

ARTICLE III

PURPOSE:

The purpose for which the Company is organized is any and all lawful business.

ARTICLE IV

REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name and the Florida street address of the Company's initial registered office are Corporation Service Company – 1201 Hays Street, Tallahassee, FL 32301.

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.

Corporation Service Company

By: _____

Name: _____

Title _____

Lydia Cohen
Asst. Vice President

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ARTICLE V
MANAGEMENT:

The name and address of each person authorized to manage and control the Company.

Title:

Name and Address:

Manager

HD Supply GP & Management, Inc.
3400 Cumberland Boulevard Southeast
Atlanta, GA 30339

ARTICLE VI
EFFECTIVE DATE:

These Articles of Organization are effective upon the date of filing.

[Signature Page Follows]

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

HD Supply Holdings, LLC

By: 

Name: James F. Brumsey

Its: Vice President – Legal and Assistant
Secretary

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NOTARIAL PUBLIC
ALABAMA