

Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

S TALLENT
NOV 06 2019

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
LEHMAN PIPE AND SUPPLY BROWARD, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION

OF

LEHMAN PIPE AND SUPPLY BROWARD, LLC

ARTICLE I - Name

The name of the Limited Liability Company is **Lehman Pipe and Supply Broward, LLC** (the "Company").

ARTICLE II - Address

The mailing address and street address of the principal office of the Company is 510 NW 84th Avenue, Unit 232, Plantation, Florida 33324.

ARTICLE III - Management

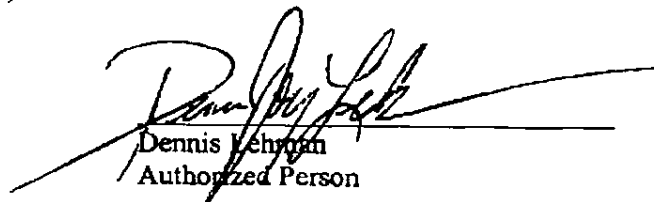
The Company shall be managed by a manager and is therefore a manager-managed Company. The name of the initial manager is Dennis Lehman.

ARTICLE IV- Registered Agent and Office

The street address of the Company's initial registered office is 515 East Park Avenue, 2nd Floor, Tallahassee, Florida 32301, and the name of its initial registered agent at such office is Capitol Corporate Services, Inc.

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.

Dated this 31 day of October, 2019


Dennis Lehman
Authorized Person

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STATE OF FLORIDA
DEPARTMENT OF STATE

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

The undersigned, having been named as Registered Agent and to accept service of process for **Lehman Pipe and Supply Broward, LLC** at the place designated in these Articles of Organization, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 605.

Dated this 5th day of October, 2019

Capitol Corporate Services, Inc.

By: Kim Tadlock
Kim Tadlock, Asst Sec on behalf of
Capitol Corporate Services, Inc.