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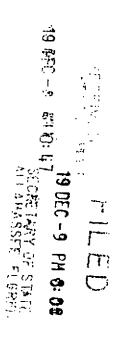
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ARTICLES OF ORGANIZATION

FOR

CHRIS CECIL'S PLUMBING, LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I - NAME:

The name of the Limited Liability Company shall be: Chris Cecil's Plumbing, LLC (the "Company").

ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

33348 Ohio Avenue Ridge Manor, Florida 33523

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is One Lake Morton Drive, Lakeland, Florida 33801, and the name of the registered agent at such address is Keith C. Smith, Esquire.

ARTICLE IV - MANAGEMENT:

The Company shall be managed by one or more Managers. The name and address of the initial Manager is:

Christopher J. Cecil 33348 Ohio Avenue Ridge Manor, Florida 33523

Christophet I Cecil Organizer

<u>CERTIFICATE OF DESIGNATION</u> REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:

Chris Cecil's Plumbing, LLC

2. The name and address of the registered agent and office is:

Keith C. Smith, Esquire One Lake Morton Drive Lakeland, Florida 33801

Christopher J. Cecil, Organizet

DATE

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.

KEITH C. SMI**TH-ES**OUIRE

12-9-19

DATE