L22000156018

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
W22-48321

Office Use Only



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2022 APR 11 AM 8: 10 SECRE WAY OF STATE

2022 MS 11 FT 2:00

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 04/11/22

NAME: EVEREST MECHANICAL SERVICES, LLC

TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE Q Hodge

COVER LETTER

	ew Filing Sedivision of Co				
SUBJECT		'MECHANICAL SER	RVICES, I.	LC	
SOBJECT	· <u> </u>	Name o	f Limited I	Liability Company	
The enclose	ed Articles of	Organization and fee(s) are subn	nitted for filing.	
Please retur	rn all corresp	ondence concerning th	is matter to	the following:	
	Christopher	Riley			
			Nar	me of Person	
	Huck Boum	a, PC			
			Fir	m/Company	·
	1755 South	Naperville Road, Suite	200	·	
				Address	
	Wheaton, II.	. 60189			
,	wliniewicz@	wsmech.com	City/Sta	ate and Zip Code	
_			used for fu	ture annual report notificat	tion)
For further in	oformation co	ncerning this matter, p	lease call:		
	Christopher I	Riley al	630	311-1123	
		e of Person	Area Co		
Enclosed is	a check for the	he following amount:			
□\$125.00		□\$130,00 Filing Fe Certificate of Status	C	J\$155.00 Filing Fee & ertified Copy itional copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee eet, Suite 810



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 11, 2022

FLORIDA FILING

SUBJECT: EVEREST MECHANICAL SERVICES, LLC

Ref. Number: W22000048321

We have received your document for EVEREST MECHANICAL SERVICES, LLC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Alleuse Neer Original File Date A Mank you!

Carlos E Rico Regulatory Specialist III

Letter Number: 822A00008408

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

2022 APR 11 AM 8: 10

EVEREST MECHANICAL SERVICES, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

SECKLIARY OF STATE TALLAHASSEE, FL

ARTICLE II - Address: The mailing address and street address of the principal of	ffice of the Limite	ed Liability Company is:					
Principal Office Address:		Mailing Address:					
2007 Corporate Lane	20	2007 Corporate Lane					
Naperville, Ilinois 60563	Na	Naperville, Ilinois 60563					
ARTICLE III - Registered Agent, Registered Office, of (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.) The name and the Florida street address of the registered.	Registered Agent n.)	ent's Signature: . You must designate an individual or					
-	_	s Inc					
riorida Filling &	Florida Filing & Search Services, Inc. Name						
155 Office Plaza Drive Florida street address (P.O. Box NOT acceptable)							
Tallahassee, FL 3	Tallahassee, FL 32301						
City	State	Zip					
Having been named as registered agent and to accept service blace designated in this certificate, I hereby accept the appoint the agree to comply with the provisions of all statutes resum familiar with and accept the obligations of my position and accept the configurations of my position and accept the configuration accept the configuration and accept the configuration and accept the configuration accept the configuration and accept the configuration accept	ointment as registe lating to the prope is registered agen	red agent and agree to act in this capacity. I er and complete performance of my duties, and I					

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager <u>MGR</u>	Westside Mechanical Group 2007 Corporate Lane Naperville, IL 60563	LL AH	2002 1000 1
		75	
			
(Use attachment if necessary) ARTICLE V: Effective date, if other than the da	te of filing:	(OPTIONAL)	
If an effective date is listed, the date must be some date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department	meet the applicable statutory filing rec		
RTICLE VI: Other provisions, if any.			
REQUIRED SIGNATURE:			_
This document is exec I am aware that any fai	nember or an authorized representate used in accordance with section 605.02 se information submitted in a document ee felony as provided for in s.817.155,	203 (1) (b), Florida Statutes. It to the Department of State	
James F. Reiss,	CEO Typed or printed name of signee		

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)