Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000161874 3)))



H220001618743ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 Phone : (215)563-8113 Fax Number : (215)977-9386

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.

Biggs Solar Solutions, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu



(((H220001618743)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Biggs Solar Solu			· · · · · · · · · · · · · · · · · · ·	
(Must	contain the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address:		on out . t t . ta. a	The transfer of the second	
ne maining address and stre	et address of the principal of	nice of the Limited	Liability Company is:	
<u>Prir</u>	ncipal Office Address:		Mailing Address:	
9703 Nearwater	Place	970	Nearwater Place	
Windermere, FL	34786	Win	dermere, FL 34786	
RTICLE III - Registered The Limited Liability Comp	Agent, Registered Office, &	& Registered Agen		r
ARTICLE III - Registered The Limited Liability Compinother business entity with	Agent, Registered Office, & pany cannot serve as its own	& Registered Agent. Registered Agent.	it's Signature:	
RTICLE III - Registered The Limited Liability Comp nother business entity with	Agent, Registered Office, of pany cannot serve as its own an active Florida registration	& Registered Agent. Registered Agent.	it's Signature:	
RTICLE III - Registered The Limited Liability Comp nother business entity with	Agent, Registered Office, a pany cannot serve as its own an active Florida registration reet address of the registered	& Registered Agent. Registered Agent.	it's Signature:	
RTICLE III - Registered The Limited Liability Comp nother business entity with	Agent, Registered Office, a pany cannot serve as its own an active Florida registration reet address of the registered	& Registered Agent. Registered Agent. n.) agent are: Name	it's Signature:	2022 HAY - 4
ARTICLE III - Registered The Limited Liability Company another business entity with	Agent, Registered Office, a pany cannot serve as its own an active Florida registration reet address of the registered Thomas Biggs	& Registered Agent. Registered Agent. n.) agent are: Name	rt's Signature: You must designate an individual o	2022 HAY - 4 AM
ARTICLE III - Registered The Limited Liability Companother business entity with	Agent, Registered Office, a pany cannot serve as its own an active Florida registration reet address of the registered Thomas Biggs 9703 Nearwater Place	& Registered Agent. Registered Agent. n.) agent are: Name	rt's Signature: You must designate an individual o	2022 HAY -4

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..

Registered Agent's Signature (REQUIREL

(CONTINUED)

(((H220001618743)))

Title:		Name and Address:	
	uthorized Member	• ,	
"MGR" = Ma	nager		
AMBR	-	Thomas Biggs	
INCOL		9703 Nearwater Place	_
	3	Windermere, FL 34786	_
			_
	· · · · · · · · · · · · · · · · · · ·		<u>-</u>
	_		
			-
	-		-
	-		- '
			_
	-		_
	-		_
TICLE V: Effectiv	ent if necessary) e date, if other than the date of fil	ling: (OPTIONAL)- ;	2022
n effective date is : date of filing.)	e date, if other than the date of fil isted, the date must be specific	ling: (OPTIONAL) and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will no	date at
on effective date is a date of filing.) se: If the date inser	e date, if other than the date of fil isted, the date must be specific	the applicable statutory filing requirements, this date willing	2022 Man Y liste
date of filing.) ie: If the date inser document's effection	e date, if other than the date of fil isted, the date must be specific ted in this block does not meet be date on the Department of St	the applicable statutory filing requirements, this date willing	t be liste
date of filing.) ie: If the date inser document's effection	e date, if other than the date of fil isted, the date must be specific ted in this block does not meet be date on the Department of St	the applicable statutory filing requirements, this date willing	A
n effective date is a late of filling.) e: If the date inser document's effection	e date, if other than the date of fil isted, the date must be specific ted in this block does not meet be date on the Department of St rovisions, if any.	the applicable statutory filing requirements, this date willing	t be liste
n effective date is a late of filling.) e: If the date inserdocument's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet the date on the Department of St rovisions, if any.	the applicable statutory filing requirements, this date wilking ate's records.	i be liste
n effective date is a late of filling.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet the date on the Department of St rovisions, if any.	the applicable statutory filing requirements, this date wilking ate's records.	A
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet be date on the Department of Strovisions, if any.	the applicable statutory filing requirements, this date wilking ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet the date on the Department of St rovisions, if any.	the applicable statutory filing requirements, this date wilking ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet be date on the Department of Strovisions, if any.	the applicable statutory filing requirements, this date wilking ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet by date on the Department of Strovisions, if any. SIGNATURE:	the applicable statutory filing requirements, this date will no ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet by date on the Department of Strovisions, if any. SIGNATURE: Signature of a membe This document is executed in	the applicable statutory filing requirements, this date will no ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet by date on the Department of Strovisions, if any. SIGNATURE: Signature of a membe This document is executed in I am aware that any false info	the applicable statutory filing requirements, this date will no ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet by date on the Department of Strovisions, if any. SIGNATURE: Signature of a membe This document is executed in I am aware that any false info	the applicable statutory filing requirements, this date will no ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet by date on the Department of Strovisions, if any. SIGNATURE: Signature of a membe This document is executed in I am aware that any false info constitutes a third degree felo	the applicable statutory filing requirements, this date will no ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet to date on the Department of Strovisions, if any. SIGNATURE: Signature of a member This document is executed in I am aware that any false info constitutes a third degree felo	the applicable statutory filing requirements, this date will no ate's records. To an authorized representative of a member. I accordance with section 605.0203 (1) (b), Florida Statutes. I mation submitted in a document to the Department of State any as provided for in s.817.155, F.S.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet to date on the Department of Strovisions, if any. SIGNATURE: Signature of a member This document is executed in I am aware that any false info constitutes a third degree felo	the applicable statutory filing requirements, this date will no ate's records.	i be liste
n effective date is a date of filing.) e: If the date inser document's effection	e date, if other than the date of filisted, the date must be specific ted in this block does not meet to date on the Department of Strovisions, if any. SIGNATURE: Signature of a member This document is executed in I am aware that any false info constitutes a third degree felo	the applicable statutory filing requirements, this date will no ate's records. To an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes. In accordance with section submitted in a document to the Department of State only as provided for in s.817.155, F.S.	i be liste
n effective date is a date of filing.) e: If the date inser document's effective of the part of the pa	e date, if other than the date of filisted, the date must be specificated in this block does not meet be date on the Department of Strovisions, if any. SIGNATURE: SIgnature of a membe This document is executed in I am aware that any false info constitutes a third degree felo Thomas Biggs	the applicable statutory filing requirements, this date will no ate's records. To an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes.	i be liste
an effective date is indate of filling.) te: If the date inser document's effective tricker processes the second of the second o	e date, if other than the date of filisted, the date must be specificated in this block does not meet be date on the Department of Strovisions, if any. SIGNATURE: SIgnature of a membe This document is executed in I am aware that any false info constitutes a third degree felo Thomas Biggs	the applicable statutory filing requirements, this date will no ate's records. To an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes. In accordance with section submitted in a document to the Department of State only as provided for in s.817.155, F.S.	i be liste