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.

(((H25000033070 3)))



H250000330703ABCU

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 : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

\*\*Enter the email address for this business entity to be used for future  $\overset{\ensuremath{\omega}}{=}$ annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_

## FLORIDA LIMITED LIABILITY CO. NEPTUNE PLUMBING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:		
The name of the Limited Liability Company is:		
NEPTUNE PLUMBING, LLC.	<del></del>	
ARTICLE II – ADDRESS:		
The physical and mailing address of the Limited Liability Company is:		
12623 Hobbit Lane		
Jacksonville, FL 32225		
ARTICLE III - REGISTERED AGENT NAME, OFFICE & SIGNATURE:	•	
The name and Florida street address of the registered agent are:		
	.;>	
Spancer Goodrum	۱ نية	

Spancer Goodrum 12623 Hobbit Lane Jacksonville, FL 32225

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, Florida Statues.

Registered Agent's Signature

## ARTICLE IV - MANAGER(S) OR MANAGING MEMBER(S):

The name and address of each Manager or Managing Member is as follows:

Title:

Name & Address:

Managing Member

Spencer Goodrum 12623 Hobbit Lane Jacksonville, FL 32225

Signature of a member or an authorized representative of a member.

(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.)

Spencer Goodrum

Typed or printed name of signee