

L03000051719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

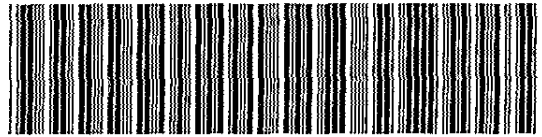
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

P/11
[Signature]



700024964237

12/04/03--01043--013 **150.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC -4 AM 10:02

FILED

To: Registration Section
Division of Corporations

Name of person - Lance C Pararo (Mgmn)

Block Head Service (LLC)

963 Village Green Dr

Jacksonville, FL 32234

Lance C. Pararo

904 858 - 3500 (day)

904 266 - 1166 (evening)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC -4 AM 10:02

FILED

The enclosed Articles of Organization + fee(s)
are for filing. Please return all correspondence
concerning this matter to the named above. Thank You.

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Black Head Concrete Service (LLC)

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

963 Village Green Dr

Jacksonville, FL 32234

Mailing Address:

963 Village Green Dr

Jacksonville, FL 32234

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Lance C. Porro
Name

963 Village Green Dr
Florida street address (P.O. Box **NOT** acceptable)

Jacksonville, FL FLORIDA 32234
City, State, and Zip

03 DEC -4 AM 10:02
SECRETARY OF STATE
ALLAHASSEE, FLORIDA
FILED

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 608, Florida Statutes..


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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Laure C. Pararo
963 Village Green Dr
Jacksonville, FL 32234

(Use attachment if necessary)

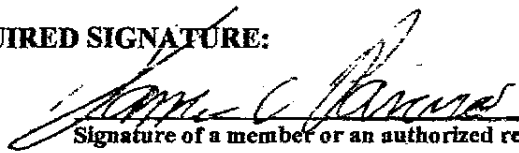
SEP 11 AM 10:11
TALLAHASSEE FLORIDA

03 DEC -4 AM 10:02

FILED

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Laure C. Pararo
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)