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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

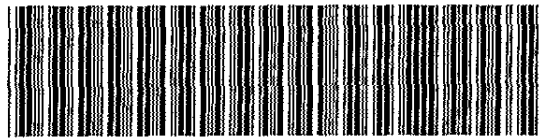
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TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RICHARD S. LARKIN GENERAL CONTRACTOR<LLC>  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICHARD S. LARKIN  
(Name of Person)

RICHARD S. LARKIN GENERAL CONTRACTOR<LLC>  
(Firm/Company)

3469 1ST AVENUE  
(Address)

ST. JAMES CITY, FLORIDA 33956  
(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD S. LARKIN at (239) 283-4871  
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

MAILING ADDRESS:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RICHARD S. LARKIN GENERAL CONTRACTOR < LLC >

ARTICLE II - Address:

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

Principal Office Address:

3469 1st AVE.  
St. James City,  
Florida 33956

Mailing Address:

3469 1st AVE.  
St. James City,  
Florida 33956

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

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

RICHARD S. LARKIN  
Name

3469 1st AVE.  
Florida street address (P.O. Box NOT acceptable)

ST. JAMES CITY, FLORIDA 33956  
City, State, and Zip

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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.

Richard S Larkin  
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:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>"MGR"</u>	<u>RICHARD S. LARKIN</u> <u>3469 1st Ave</u> <u>St. James City, FL 33956</u>
<u>"MGR"</u>	<u>BETTY M. LARKIN</u> <u>3469 1st Ave</u> <u>St. James City, FL 33956</u>
<u>"MGR"</u>	<u>RICHARD E. MOORE</u> <u>3383 4th Ave</u> <u>St. James City, FL 33956</u>

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Richard S Larkin

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.)

RICHARD S. LARKIN

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)

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