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ACCOUNT NO. : 072100000032

REFERENCE : 641304 7209559

AUTHORIZATION :

Patricia Pigatto

COST LIMIT : \$ 125

FILED
NO APR 21 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : March 28, 2000

ORDER TIME : 12:40 PM

ORDER NO. : 641304-005

100003219081--0

CUSTOMER NO: 7209559

CUSTOMER: Ms. Bonnie L. Bird-loeffler
MS. BONNIE L. BIRD-LOEFFLER
MS. BONNIE L. BIRD-LOEFFLER
417 West River Road

Palatka, FL 32177

DOMESTIC FILING

NAME: FLOAT-CRETE SYSTEMS, LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

EXAMINER'S INITIALS:

LOD-4641
Name: *Ch H-2*
Address: *Ch*
Ch
Ch
Ch
Ch

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 APR 21 PM 2:28

RECEIVED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLOAT-CRETE SYSTEMS, LLC

ARTICLE II - Address:

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

417 WEST RIVER ROAD, PALATKA, FLORIDA 32177

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

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

CORPORATION SERVICE COMPANY
Name
1201 HAYS STREET
Florida street address (P.O. Box NOT acceptable)
TALLAHASSEE FL 32301
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

160 APR 21 PM 3:03

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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, F.S..

Laura R. Dunlap
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Laura R. Dunlap
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.)

AUTHORIZED REPRESENTATIVE, LAURA R. DUNLAP
Typed or printed name of signer

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)

MEMBERS

FEDERICO LEOFFLER
LAJA 118
MEXICO 01900 D. F.

DR. KENNETH MASSEY
1034 CLAYTON LANE
APARTMENT 911
AUSTIN, TX 78723

WILLIAM BIRD
2316 WHITE AVENUE
SANTA BARBARA, CA 93109

CRL

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00 APR 21 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Att. TCC/CRL
c/o CSC
Tallahassee, FL 32301
FAX: 850-521-1010

April 11th, 2000
Ref: FLOAT-CRETE
SYSTEMS, LLC

FILED
NO APR 21 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Corporation ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of FLOAT-CRETE SYSTEMS, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein by CSC without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this
day of _____, 2000.

Sonia R. Pressley
WITNESS

Sonia R. Pressley
TYPED OR PRINTED NAME

Berita L. Lookadoo
WITNESS

Berita L. Lookadoo
TYPED OR PRINTED NAME

Federico Loeffler
SIGNATURE
FEDERICO LOEFFLER
TYPED OR PRINTED NAME

CRL

STATE OF FLA. COUNTY OF Putnam I hereby certify that on
this day before me personally appeared Federico Loeffler
is known to be the person described in and who executed the foregoing
instrument and acknowledged that she executed the same.
Witness my hand and seal this 11 day of April, 2000

