

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LO1000013867

Southwest Florida Rock LLC

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\*\*\*\*125.00 \*\*\*\*125.00

\*File Second

Art of Inc. File

LTD Partnership File

Foreign Corp. File

X L.C. File

Fictitious Name File

Trade/Service Mark

Merger File

Art. of Amend. File

RA Resignation

Dissolution / Withdrawal

Annual Report / Reinstatement

X Cert. Copy

X Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

RECEIVED  
01 AUG 17 PM 2:57  
TALLAHASSEE, FLORIDA 32301  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

APPROVED  
AND  
FILED

8-17-01

Signature

Requested by: KC

8/17

Name

Date

Time

Walk-In

Will Pick Up

**ARTICLES OF ORGANIZATION  
OF  
SOUTHWEST FLORIDA ROCK, L.L.C.**

The undersigned person(s) pursuant to the provisions of the Florida Limited Liability Company Act, hereby adopt the following Articles of Organization:

**FIRST:** The name of the Limited Liability Company shall be SOUTHWEST FLORIDA ROCK, L.L.C. (hereinafter "Company").

**SECOND:** The period of its duration shall be perpetual.

**THIRD:** The mailing address and street address of the principal office is 12670 New Brittany Blvd., Suite 201, Fort Myers, FL 33907.

**FOURTH:** The name and street address of the registered agent within the State of Florida is TIMOTHY McCULLERS, 12670 New Brittany Blvd., Suite 201, Fort Myers, FL 33907.

**FIFTH:** The Limited Liability Company is to be **member** managed.

**SIXTH:** The person or persons executing these Articles of Organization is (are) a member or the authorized representative of a member of the Limited Liability Company.

**IN WITNESS WHEREOF**, the undersigned have executed these Articles of Organization of and acknowledged them to be our act and deed this 10<sup>th</sup> day of August, 2001.

Signed: \_\_\_\_\_

TIMOTHY R. McCULLERS, Member

STATE OF FLORIDA     )  
COUNTY OF LEE        )

SWORN TO and subscribed before me this 10<sup>th</sup> day of August, 2001, by TIMOTHY R. McCULLERS who [ ☒ ] is personally known to me or who [     ] has produced \_\_\_\_\_ as identification and who did take an oath.

\_\_\_\_\_  
Notary Public



Thomas F. Kiesel  
MY COMMISSION # CC691773 EXPIRES  
February 25, 2002  
BONDED THRU TROY FAIN INSURANCE, INC.

01 AUG 17 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

**SOUTHWEST FLORIDA ROCK, L.L.C.**

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

**TIMOTHY R. McCULLERS**  
(Name)

**12670 New Brittany Blvd., Suite 201**  
Florida Street Address (P.O.Box **NOT** Acceptable)

Fort Myers, FL 33907  
City/State/Zip

Having been named as registered agent and to accept service 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 statutes relating to the proper and complete performance of duties, and I am familiar with and accept the obligations of position as registered agent.

  
(Signature)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED