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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
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03 JUL 21 PM 12:49
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DIVISION OF STATE
TALLAHASSEE, FLORIDA

03 JUL 21 PM 12:55
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Watkins Leasing, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

JB
7-21-03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Watkins Leasing, LLC

ARTICLE II - Address:

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

Principal Office Address:

1958 Monroe Drive, N.E.
Atlanta, Georgia 30324

Mailing Address:

1958 Monroe Drive, N.E.
Atlanta, Georgia 30324

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

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

C.T. Corporation Vegetation
Name
1200 South Pine Island Rd.
Florida street address (P.O. Box NOT acceptable)
Plantation FL
City, State, and Zip

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.

Janie Bryan Janie Bryan
Registered Agent's Signature Special Asst.
Secy.

(CONTINUED)

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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:No ManagersNo Managing MembersSole Member

Watkins Associated Industries, Inc.
1958 Monroe Drive, N.E.
Atlanta, Georgia 30324

(Use attachment if necessary)

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.)

Watkins Associated Industries, Inc.

Typed or printed name of signer

By: Michael L. Watkins, Its: PresidentFiling 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)

Michael L.
 Watkins

03 JUL 21 PM 12:49
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

AND
 FILED