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| Certified Copies Certificates of Status |  |  |
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| Special Instructions to Filing Officer: |  |  |
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# TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations                          |  |  |
|--|--|--|
| •  |  |  |
| SUBJECT: A & A Assets LLC  | E.                                       |  |
| (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:  |  |  |
|  |  |  |
|  | ALLAHASSEL FLORIDA                       |  |
| Michael C. Lee (Name of Person)  |  |  |
| (traine of treson)   |  |  |
|  | 美に伝                                      |  |
| Lee & Associates   | See E                                    |  |
| (Firm/Company)   | و الله الله الله الله الله الله الله الل |  |
|  | 50                                       |  |
|  |  |  |
| 601 N. Ashley St.  | ——————————————————————————————————————   |  |
| (Address)  |  |  |
|  |  |  |
| Valdosta, GA 31601   |  |  |
| (City/State and Zip Code)  |  |  |
|  | <del></del>                              |  |
| For further information concerning this matter, ple                        | ease call:                               |  |
|  |  |  |
| Michael C. Lee at (  | 229) 247~1040                            |  |
| (Name of Person)   | (Area Code & Daytime Telephone Number)   |  |
|  | AATI DIG ADDRESS.                        |  |
| STREET ADDRESS: Registration Section                                       | MAILING ADDRESS: Registration Section    |  |
| Division of Corporations   | Division of Corporations                 |  |
| 409 E. Gaines Street   | P.O_Box 6327                             |  |
| Tallahassee, Florida 32399   | Tallahassee, Florida 32314               |  |

### ARTICLES OF ORGANIZATION

OF

## A & A ASSETS LLC

### ARTICLE I.

The name of the Limited Liability Company is A & A Assets LLC.



### ARTICLE II.

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

Principal Office Address: 4994 S.W. 69<sup>th</sup> Drive Jasper, FL 32052 Mailing Address: C/O Lee & Associates 601 N. Ashley St. Valdosta, GA 31601

### ARTICLE III.

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

Dempsey Allen 4994 S.W. 69<sup>th</sup> Drive Jasper, FL 32052

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..

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### ARTICLE IV.

The name and address of each managing member is:

Dempsey Allen (MGRM) 4994 S.W. 69<sup>th</sup> Drive Jasper, FL 32052 Randall Allen (MGRM) 263 S.E. Robin Hood Place High Springs, FL 32643

In witness whereof, the undersigned managing member has executed these Articles of Organization affirming under penalties of perjury that the facts stated there in are true.

This 7 th day of Aug., 2003.

PUBLICATIONS SEE, FLORIDA