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(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	, p. 18
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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ADVANCED TAX CENTRE

A Firm of Enrolled Agents 3819 Murrell Road, Suite E, Rockledge, FL 32955

James A. Naff, EA* E. Ann Shroll, EA* Edward F. Chambers, EA Phone: (321) 636-8561 Fax: (321) 631-7208 E-Mailatc777@bellsouth.net

Thursday, September 04, 2003

Department of State Division of Corporations P.O. Box 6327 Tallahassee FL 32314

Gentlemen:

Re: Aggressive Constructors, LLC Lisa Garrett, President

Enclosed is an original and one (1) copy of the articles and intent to be a Limited Liability Company. Also enclosed is a check in the amount of \$ 125.00 for the filing fees and Registered Agent fee for this Limited Liability Company.

Please mail papers to:

Edith Ann Shroll

Advanced Tax Centre, Inc. 3819 Murrell Road, Ste E Rockledge FL 32955

Thank you.

Yours truly,

E. Ann Shroll, EA

Enclosures: check

LLC documents

12 17 12:0

* Graduate Fellow of The National Tax Practice Institute
Member: National Association of Enrolled Agents
Member: National Society of Accountants
Member: National Association of Tax Practitioners
Licensed to Represent Taxpayers at all Administrative Levels of the Internal Revenue Service
and State Department of Revenue.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

AGGRESSIVE CONSTRUCTORS, LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability	
947 Kings Post Road Rockledge, FL 32955	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent	· · · · · · · · · · · · · · · · · · ·
The name and the Florida street address of the registered agent are:	12.
Lisa Garrett Name	g
947 Kings Post Road Florida street and address (P.O. Box NOT acceptal	ble)
Rockledge, FI, 32955 City, State, and Zip	<u> </u>
TY	

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. 1 further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am famíliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

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)

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

Lisa Garrett Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

Certificate of Status (Optional) \$ 5.00