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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

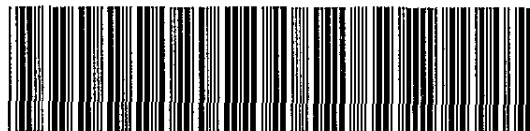
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN DEC - 5 2003

4254 Albacore Circle  
Port Charlotte, fl. 33948  
Phone & Fax 941-629-1517  
Cell-8 am-5 pm 941- 380-8050  
E-mail  
Lic. # CGC-022931

R. E. Standafer General Contractor

November 26, 2003

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed are two articles of organization along with a self-addressed envelope and a check for \$ 125.00 for filing fees. I would like one copy for my records.

Thank You.

Sincerely,



R. E. Standafer

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TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** R.E. STANDAER GENERAL CONTRACTOR LLC  
(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:

R.E. STANDAER  
(Name of Person)

R.E. STANDAER GENERAL CONTRACTOR L.L.C.  
(Firm/Company)

4254 ALBACORE CIRCLE  
(Address)

PORT CHARLOTTE, FL. 33948  
(City/State and Zip Code)

For further information concerning this matter, please call:

R.E. STANDAER at ( 941 ) 629-1517  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

R.E. STANDAFER GENERAL CONTRACTOR LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

4254 ALBACORE CIRCLE

PORT CHARLOTTE, FL 33948

**Mailing Address:**

4254 ALBACORE CIRCLE

PORT CHARLOTTE FL 33948

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

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

R.E. STANDAFER

Name

4254 ALBACORE CIRCLE

Florida street address (P.O. Box NOT acceptable)

PORT CHARLOTTE FLORIDA 33948

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, Florida Statutes..*

R.E. STANDAFER

Registered Agent's Signature

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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:**

MGR

R.E. STANDAFER  
4254 ALBACORE CIRCLE  
PORT CHARLOTTE, FL. 33948

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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(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.)

R.E. STANDAFER  
Typed or printed name of signee

**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)