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(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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SECRETARY OF STATE STATE STATE OF CORPORATION OF CO

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Florida Construction Educa		
(Name o	of Limited Liability Company)	
The enclosed Articles of Organization and fe	ee(s) are submitted for filing.	
Please return all corn	respondence concerning this matter to the following:	
Hilton E. "Bo " Creel		
- 1	(Name of Person)	_
Florida Construction Educa	ation Academy, LLC	
	(Firm/Company)	
5920 Ard Drive		O3 DEG
	(Address)	3 6 R
Youngstown, Fl 32466		ANIO: 28
	(City/State and Zip Code)	
For further information concerning this matter	er, please call:	28
Hilton E. " Bo " Creel	at (850) 722-9911	
(Name of Person)	(Area Code & Daytime Telephone Number)	2*

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Florida Construction Education Academy, LLC	
ARTICLE II - Address: The mailing address and street address of the principal	l office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Florida Construction Education Academy, LC	Florida Construction Education Academy
5920 Ard Drive	POBox 17.56
Youngstown, Fl 32466	Panama City, Fl 3240
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered.	
Hilton E. " Bo " Creel Name	
5920 Ard Drive Florida street address (P.O. Box	NOT acceptable)
Youngstown, City, State, and Zin	FLORIDA 32466

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..

Registered Agent's Signature

Page 1 of 3 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Hilton E "Bo" Creel	-	
	5920 Ard Drive Youngstown, Fl 32466	- - · · ·	
MGRM	Emerald Coast Consultants and Management Services, Inc 7040 Benton Drive Panama City, Fl 32404	<u>-</u>	
MGRM	Richard Alan Price 809 Balboa Ave Panama City, Fl 32404	- - -	
MGRM	BCD, Inc 4316 De Len Circle	-	
(Use attachment if necessary)	Panama City, F1 32404	03 OEC ~	O NOISIVIC
NOTE: An additional article must be	added if an effective date is requested.	-3 AM	ARY OF
REQUIRED SIGNATURE: Signature of a member or an au	athorized representative of a member.	110: 28	STATE
	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury		

Hilton E "Bo" Creel

that the facts stated herein are true.)

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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Bayne Collins 465 Harrison Av Panama City, Fl 32401		
MGRM	Franklin E Ford 175 Earl Panama City Beach, Fl 32413	 	
MGRM	Michael D Hodges 7313 Pittsburg St Panama City, Fl 32404		
(Use attachment if necessary)			
NOTE: An additional article must be added if an effective date is requested.			
Signature of a member or an au	thorized representative of a member,	FOF STATE	
(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.) Hitton E "Bo" Crook			

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)

Typed or printed name of signee