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

From: Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (305) 674-3313
Fax Number : (305) 675-2811

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

SILBIA GALARZA CONCRETE, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED
LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

SILBIA GALARZA CONCRETE, LLC

ARTICLE II: Address

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

1750 HODGES BLVD. APT. 1301
JACKSONVILLE, FLORIDA 32224**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**

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

SILBIA GALARZA
1750 HODGES BLVD. APT. 1301
JACKSONVILLE, FLORIDA 32224

Having been named as registered agent 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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



SILBIA GALARZA / Registered Agent's Signature

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Page 2 SILBIA GALARZA CONCRETE, LLC

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V: MEMBERS (optional)

MANAGING MEMBER:

SILBIA GALARZA

1750 HODGES BLVD. APT. 1301

JACKSONVILLE, FLORIDA 32224



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.)

SILBIA GALARZA

Typed or printed name of signee

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