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03 DEC 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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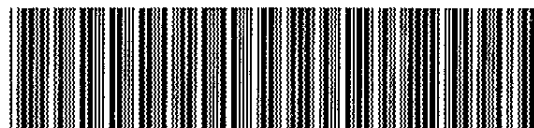
(Business Entity Name)

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TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

03 DEC 24 PM 1:46

SUBJECT: LAMAR DUDLEY PAINTING, LLC
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAMES L. DUDLEY
(Name of Person)

LAMAR DUDLEY PAINTING, LLC
(Firm/Company)

C/O P. O. BOX 1568
(Address)

LYNN HAVEN, FL 32444
(City/State and Zip Code)

For further information concerning this matter, please call:

CONNIE E. THARPE
(Name of Person)

at (850) 785-4412
(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

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name

The name of the Limited Liability Company is

LAMAR DUDLEY PAINTING, LLC

ARTICLE II - Address

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

Principal Office Address

3907 ENVETI COURT

PANAMA CITY, FL 32405

Mailing Address

3907 ENVETI COURT

PANAMA CITY, FL 32405

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

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

JAMES L. DUDLEY

Name

3907 ENVETI COURT

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

PANAMA CITY, FLORIDA 32405

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.


Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title
"MGR" = Manager
"MGRM" = Managing Member

Name and Address

MGRM

JAMES L. DUDLEY
3907 ENVETI COURT
PANAMA CITY, FL 32405

(Use attachment if necessary)

ADD ARTICLE

ARTICLE V - DESIGNATION OF EFFECTIVE DATE

The effective date of this company shall be January 1, 2004

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.)

JAMES L. DUDLEY

Typed or printed name of signer

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)