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

From: Account Name : A.B.S. OF JACKSONVILLE, INC.  
Account Number : I20010000215  
Phone : (904) 777-1533  
Fax Number : (904) 777-1717

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**LIMITED LIABILITY COMPANY**

Anthony Lockett Contractor, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

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*RL*

EFFECTIVE DATE  
*1-14-04*

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I. NAME:**

The name of the Limited Liability Company is: **Anthony Lockett Contractor, LLC**

**ARTICLE II. ADDRESS:**

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

3580 Pall Mall Drive #2301  
Jacksonville, FL 32257

**ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:**

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

Anthony C. Lockett, MGR  
3580 Pall Mall Drive #2301  
Jacksonville, FL 32257

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*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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.*

  
Anthony C. Lockett/ Registered Agent

1-14-04  
Date

**ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):**

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

**Title:**  
MGR

**Name and Address:**  
Anthony C. Lockett  
3580 Pall Mall Drive #2301  
Jacksonville, FL 32257

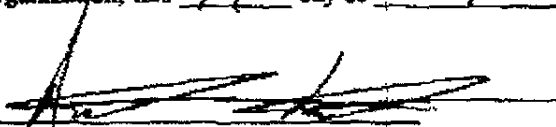
1-14-04

**ARTICLE V. EFFECTIVE DATE**

The effective date of this document shall be January 14, 2004.

**REQUIRED SIGNATURE:**

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this 14 day of 1, 2004

  
\_\_\_\_\_  
Anthony C. Lockett, Member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

January 14, 2004

A.B.S. OF JACKSONVILLE, INC.

SUBJECT: ANTHONY LOCKETT CONTRACTOR, LLC  
REF: W04000001963

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific and cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 14, 2004. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley  
Document Specialist

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Letter Number: 004000002733

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