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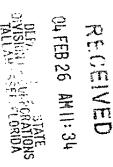
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SECRETARY OF STATE TALL WILLS OF AM II: 38



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Clay Blowdon'S Welding & FABEICATION L.L.e. (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing.
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Clay TON R. Show DON (Name of Person)
Clay Brogdon's Welding + Fabrication LLC (Firm/Company)
5952 DEER PARIL CIRCLE (Address)
TallahassEE, Florida 32311 (City/State and Zip Code)
For further information concerning this matter, please call:
Clay Broadon at (850) 933-4890 (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



ARTICLE I - Name:

The name of the Limited Liability Company is:

Clay BROWDON'S WELding + FABRICATION LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
5952 DEER PARIL CIRCLE	5952 DEER PARK CIRCLE
Tall ahassee FloriDA	TallahassEE FLORIDA
32311	32311

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Clayton R. Brosdon
Name

5952 DEER PARK CIRCLE
Florida street address (P.O. Box NOT acceptable)

Tallahassee FLORIDA 323/1
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

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managin The name and address of each Manager of	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MURIN	Clay Brogdon 5952 DEER PARK CIR TallahassEE Florion 32311
(Use attachment if necessary)	
	added if an effective date is requested.
REQUIRED SIGNATURE:	
Clay ton 1	1. Bundan
Signature of a member or an ai	uthorized representative of a member.
of this document constitutes an a that the facts stated herein are true.	•
Clay TON P	2. Brosdom
Typed or pri	nted 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)