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TRANSMITTAL LETTER

	Registration Section Division of Corporations			
SUBJECT: AAA CONCRETE, L.L.C.				
502020	(Name of Limited Liability Company)			
The encl	osed Articles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
SAMMY S. MCGOUGH				
	(Name of Person)			
	AAA CONCRETE, L.L.C.	TALLAH RALLAH		
	(Firm/Company)	THE R		
		တွင် ယ ရ		
_	124 DUNCAN DRIVE			
	(Address)	70 9		
	CRAWFORDVILLE, FLORIDA 32327	ORID.		
	(City/State and Zip Code)	P		
For furth	ner information concerning this matter, please call:			
RICHARD A. GLOVER, C.P.A., P.A. at (850) 422-1042				
	(Name of Person) (Area Code & Daytime Telephone Number	1)		

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

AAA CONCI	RETE, L.L.C.	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company		
Principal Office Address:	Mailing Address:	
124 DUNCAN DRIVE	124 DUNCAN DRIVE	
CRAWFORDVILLE, FLORIDA 32327	CRAWFORDVILLE, FLORIDA 32327	
	·	
The name and the Florida street address of the re-	•	
	egistered agent are:	
The name and the Florida street address of the results and the Florida street address and the Florida	egistered agent are: ER, C.P.A., P.A. ONS DRIVE, SUITE 108	
The name and the Florida street address of the re- RICHARD A. GLOV Name	egistered agent are: ER, C.P.A., P.A. ONS DRIVE, SUITE 108	
The name and the Florida street address of the respective and the Florida street address of the respective and the Florida street address (P.O. TALLAHASS)	egistered agent are: ER, C.P.A., P.A. ONS DRIVE, SUITE 108 Box NOT acceptable) EE, FLORIDA 32327	
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The name and the Florida street address of the respectively. RICHARD A. GLOV Name 1809 MICCOSUKEE COMMO Florida street address (P.O. TALLAHASS) City, State, and to accept serving at the place designated in this certificate, I herely act in this capacity. I further agree to comply with	egistered agent are: ER, C.P.A., P.A. ONS DRIVE, SUITE 108 Box NOT acceptable) EE, FLORIDA 32327 and Zip Price of process for the above stated limited liability accept the appointment as registered agent and a the provisions of all statutes relating to the prop	
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The name and the Florida street address of the respectively. RICHARD A. GLOV Name 1809 MICCOSUKEE COMMO Florida street address (P.O. TALLAHASS) City, State, and to accept serving at the place designated in this certificate, I herely act in this capacity. I further agree to comply with	egistered agent are: ER, C.P.A., P.A. ONS DRIVE, SUITE 108 Box NOT acceptable) EE, FLORIDA 32327 Ind Zip vice of process for the above stated limited liability accept the appointment as registered agent and at the provisions of all statutes relating to the proper with and accept the obligations of my position as	

Page 1 of 2 (CONTINUED)

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
"MGRM"	SAMMY S. MCGOUGH
	124 DUNCAN DRIVE
	CRAWFORDVILLE, FLORIDA 32327
(Use attachment if necessary)	
NOTE: An additional article must be	pe added if an effective date is requested.
REQUIRED SIGNATURE:	& Mc Jank
Signature of a member or an	authorized representative of a member.
(In accordance with section 60 of this document constitutes at that the facts stated herein are	08.408(3), Florida Statutes, the execution n affirmation under the penalties of perjury true.)
	IY S. MCGOUGH
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)