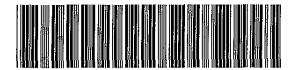
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TRANSMITTAL LETTER

SUBJECT: C+N MAINTENANCE SERVICE LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

MARTHA L. NORVELLE
(Name of Person)

C+N MAINTENANCE SERVICE LLC
(Firm/Company)

5375 AIRPARK LOOP WEST
(Address)

GREEN COVE SPRINGS FL 32043-891

STREET ADDRESS:

TO:

Registration Section Division of Corporations

> Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

For further information concerning this matter, please call:

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: CAN MAINTENANCE SERVICE 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: 5375 AIRPARK LOOP WEST GREEN COVE SPRINGS FLORIDA 32043-8911 FLORIDA 32043-8911 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: POUPLD D. NORVELLE Name 5375 AIRPARK LOOP WEST Florida street address (P.O. Box NOT acceptable)

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..

GREEN COVE SPENISFLORIDA 30043-8911
City, State, and Zip

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

The name and address of each Manag	ger or Managing Member is as follows:	-
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MG-R	RONALD D. NORVELLE 5375 ATRPARK LOOP WEST GREEN COVE SKINGS, FLBOOKS-8911	· · · · · · · · · · · · · · · · · · ·
M6RM	MARTHA L. NORVELLE 5375 ATRPARK LOOP WEST GREEN COVE SPRINGS, FL32013-8911	
(Use attachment if necessary)	SECTATIANSS	04 NAR - 1
NOTE: An additional article must	be added if an effective date is requested.	(LED)
Signature of a member or a	m authorized representative of a member.	

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

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)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

RONALD D. NORVECCE
Typed or printed name of signee

that the facts stated herein are true.)