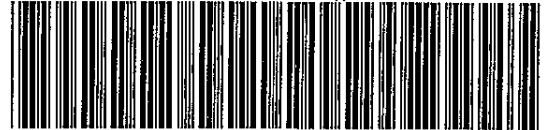


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04 MAR 15 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Pages

1 of 3

February 27, 2004

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04 MAR 15 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To: Registration Section
Division of Corporations

Subject: Billy Ward Site Works L.L.C
(Name of Limited Liability Company)

Enclosed Articles of Organization and fees are submitted for filing.

Please return the correspondence concerning this matter to the following.

Billy Ward

(Name of Person)

Subject: Billy Ward Site Works L.L.C

(Firm/Company)

7002 Pacific Avenue

(Address)

Fort Pierce FL 34951

(City/State and Zip Code)

For further information concerning this mailer, please call:

Arthur D. Sparks at (772) 464-8488

(Name of person)

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I. Name:

The name of the Limited Liability Company is:
Billy Ward Site Works L.L.C.

ARTICLE II. Address:

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

<u>Principal Office Address</u>	<u>Mailing Address</u>
---------------------------------	------------------------

P O Box 691061
Vero Beach FL 32969

P O Box 691061
Vero Beach FL 32969

ARTICLE III. Registered Agent, Registered Office, Registered Agent Signature

The name and Florida street address of the registered agent:

Billy Ward
7002 Pacific Ave
Fort Pierce FL 34951

Having been named a 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 F.S.



Registered Agent's Signature

(CONTINUED)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV - Managing Member:

The name and address of the managing member is:

Title:

MGRM = Managing member

Name and Address

MGRM

Billy Ward

7002 Pacific Avenue

Fort Pierce FL 34951

ARTICLE V - Effective date of Limited Liability Company

REQUIRED SIGNATURE:

Billy Ward

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.)

Billy Ward

Type or printed signature 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)

Page 3 of 3

Sworn to and subscribed before me March 10, 2004.

Kathryn Avelene Wood

