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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

OF THE PROPERTY OF THE PROPERT Art of Inc. File____ LTD Partnership File_____ Foreign Corp. File_____ L.C. File Fictitious Name File_____ Trade/Service Mark_____ Merger File_____ Art. of Amend. File_____ RA Resignation____ Dissolution / Withdrawal_____ Annual Report / Reinstatement_____ Cert. Copy___ Photo Copy____ Certificate of Good Standing_____ Certificate of Status_____ Certificate of Fictitious Name_____ Corp Record Search_____ Officer Search_____ Fictitious Search____ Fictitious Owner Search_____ Signature Vehicle Search_____ Driving Record_____ Requested by: UCC 1 or 3 File_____ UCC 11 Search_____ Name UCC 11 Retrieval____ Will Pick Up Walk-In

Courier.

	70 F M	
ARTICLES OF ORGANIZATION FOR FLORI	DALIMITED LIABILITY COMPANY	
ARTICLE I - Name: The name of the Limited Liability Company is: 1		
The name of the Limited Liability Company is Company in	Construction, LLC	
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Lightling Company is	
· · · · · · · · · · · · · · · · · · ·	7	
Principal Office Address:	Mailing Address:	
miami, Flot	mismi FLA	
33161		
ARTICLE III - Registered Agent. Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the registered agent are:		

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, F.S..

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Manager, The name and address of each Manager	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address: Elward Ruly 14015065 at Misoni, F. 733161
(Use attachment if necessary)	
REQUIRED SIGNATURE:	e added if an effective date is requested. On the control of a member.
of this document constituted that the facts stated here EN WARD	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury ein are true.) WELSK ed or printed name of signee
	Fling 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)