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TRANSMITTAL LETTER

Division of Corporations			
SUBJECT: Complete Tractor Sorvice LLC (Name of Limited Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filling.			
Please return all correspondence concerning this matter to the following:			
Terry Sidney (Name of Person)			
Complete Tractor Service		•	_
11134 Redemption Way	SEUL	2	T
Panama at Je 35464	HASSEE	PR 13 PM	. 5
(City/State and Zin/Code)	E S	₩ [-
For further information concerning this matter, please call:	ORIDA	ဌာ	
Sand Sidney 150 874-1561	>>		

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

(Area Code & Daytime Telephone Number)

ARTICLESOF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Complete Tractor Se	ruice, LLC
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
	failing Address:
11134 Redemption Way	11134 Rademytion Way
Panama City 4 32404	Panama City 7K32464
	A S
ARTICLE III - Registered Agent, Registered Office, & The name and the Florida street address of the registered a	gent are: SS ω
Terrence J. Su	dney CF STATE
11134 Redemption U	Day 5
Panama City & FLORI 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 Signature

Page1 of 2 (CONTINUED) ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
m b R	Jandy Sidney 11134 Rodenption Way Panama City The 32404
-	
	Ā's
(Use attachment if necessary)	LAHASSEE,
NOTE: An additional article must be a	E A P
REQUIRED SIGNATURE: Signature of a member or an aut	thorized representative of a member.
of this document constitutes an aff that the facts stated herein are true	
SANDY S	JOVEY ted 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)