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EFFECTIVE DATE
4/20/04

4/22/04

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OHM TALLAHASSEE 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:

SATISH R. PATEL
(Name of Person)

OHM TALLAHASSEE LLC
(Firm/Company)

4339 CREEKVIEW DRIVE
(Address)

DUBLIN, CA 94568
(City/State and Zip Code)

For further information concerning this matter, please call:

SATISH R. PATEL at (925) 577-5082
(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

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

EFFECTIVE DATE
4-15-04

OHM TALLAHASSEE 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:**
1695 CAPITAL CIRCLE N W	4339 CREEKVIEW DRIVE
TALLAHASSEE, FL 32303	DUBLIN, CA 94568

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

SATISH R. PATEL
Name

1695 CAPITAL CIRCLE NW
Florida street address (P.O. Box **NOT** acceptable)

TALLAHASSEE, FLORIDA 32303
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's Signature

ARTICLE IV – Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
MGR	SATISH R. PATEL 4339 CREEKVIEW DRIVE DUBLIN, CA 94568
MGR	JAGRUTI S. PATEL 4339 CREEKVIEW DRIVE DUBLIN, CA 94568
MGRM	HASMUKH L. PATEL 4339 CREEKVIEW DRIVE DUBLIN, CA 94568
MGRM	SUMATI H. PATEL 4339 CREEKVIEW DRIVE DUBLIN, CA 94568

ARTICLE V – Effective Date:
The effective date of OHM TALLAHASSEE LLC shall be APRIL 15, 2004.

REQUIRED SIGNATURE:

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.)

SATISH R. PATEL
Typed or printed name of signee