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William Brown Concrete Construction LLC

April 22, 2004

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Please be advised that enclosed you will find the necessary papers to register as a Limited Liability Company. My mailing address is William Brown

P.O. Box 2174 Lake City, FL 32056

My physical address is 772 N E Cemetary Loop Lake City, FL 32055

Sincerely,

Karen Brown

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: William Brown Concrete Construction (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:
William Brown (Name of Person)
William Brown Concrete Construction (Firm: Company)
P.O. Box 2174
(Address)
Lake City, FL 32056 (City State and Zip Code)
For further information concerning this matter, please call:
Karen Brown at (386) 752-0743 (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:	
William Brown Concrete	Construction 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:
772 NE Cemetary Rd.	P.O. Box 2174
Lake City, FL 32055	Lake City, FL 32056
ARTICLE III - Registered Agent, Registered Office. The name and the Florida street address of the registere	——————————————————————————————————————
<u>Karen Brown</u>	04 APR 23
772 N E Cemetar Florida street address (P.O. Box No.	
Lake City FL City, State, and Zip	ORIDA 3205b

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

Page 1 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>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGR	William L. Brown	
	PO BOX 2174 Lake City, FL 32056	
MCTRM	Justin T. Brown	
	P.O. BOX 2174 Lake City, FL 32056	
MGR	Karen T. Brown	
· · · · · · · · · · · · · · · · · · ·	PO BOX 2174 Lake City, FL 32056	
(Use attachment if necessary)		
NOTE: An additional article must be added if an effective date is requested.		
REQUIRED SIGNATURE:		
Kasen 1.	Brown	
Signature of a member or an authorized representative of a member.		
(In accordance with section 608 408/3). Florida Statutes, the execution		

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)

of this document constitutes an affirmation under the penalties of perjury

Karen T. Brown
Typed or printed name of signee

that the facts stated herein are true.)

To: Registration Section Division of Corporations

Listed below are three choices for the name of the Limited Liability Company I am requesting registration of.

First choice being - William Brown Concrete Construction

Second - Brown's Concrete Construcion

Third - William Brown Concrete Finishing