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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT:  Roger D. Gill Jr. 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 Roger D. Gill Jr.  (Name of Person)  Roger D. Gill Jr. LLC
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following
Roger D. Gill Jr.
(Name of Person)
(Firm/Company)
P.O. Box 238
(Address)
Molino, Fl. 32577
(City/State and Zip Code)
For further information concerning this matter, please call:
Roger D. Gill Jr. at (850 ) 587-5674
(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

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	ORIONS

ARTICLE I - Name: The name of the Limited Liability Company is:	ORIO AS
Roger D. Gill Jr., 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:
461 Molino Road	P.O. Box 238
Molino, Fl. 32577	Molino, Fl. 32577
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registere  Roger D. Gill Jr.  Name  461 Molino Road  Florida street address (P.O. Box No.	ed agent are:
Molino FL City, State, and Zip	ORIDA 32577

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)

ICDS - Monager	nging Member(s): er or Managing Member is as follows:  Name and Address:
MGRM" = Managing Member	٧,
MGR	Roger D. Gill Jr.
MGK	461 Molino Road
	Molino, Fl. 32577
:	· · · · <u>- · · · · · · · · · · · · · · ·</u>
Use attachment if necessary)	
OTE: An additional article must	be added if an effective date is requested.
EQUIRED SIGNATURE:	
Roger P	JU Ju
EQUIRED SIGNATURE:  Recycle P  Signature of a member or a	m authorized representative of a member.

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)