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(City/State/Zip/Phone #)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAY -3 PM 4:12

Guy Pearson

Construction Consultant

April 28, 2004

Registration Section
Division of Corporations
State of Florida
PO BOX 6327
Tallahassee, FL 32314

Dear Person:

Please note my name and address on this letterhead.

Guy Pearson
PO BOX 653
Safety Harbor, FL 34695-0653

My daytime phone number is

(727) 409-1686.

Please find enclosed my submission for an LLC in my business name:

Guy Pearson Consulting & Design LLC.

Please contact me as soon as possible if there are any questions.

Thank you,


Guy Pearson

04/MAY - 3 PM 4: 12
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1003 Chillum Court • Safety Harbor, Florida • 34695

Management Design

CBC058474

Inspections Consulting

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Guy Pearson Consulting & Design, 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:

Guy D. Pearson
(Name of Person)

Guy Pearson Consulting & Design
(Firm/Company)

PO BOX 653
(Address)

Safety Harbor, Florida 34695-0653
(City/State and Zip Code)

For further information concerning this matter, please call:

Guy D. Pearson at (727) 409-1686
(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

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DIVISION OF CORPORATIONS
06 MAY - 3 PM 4: 12

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

Guy Pearson

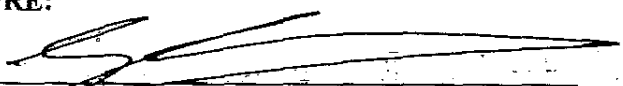
1003 Chillum Court

Safety Harbor, FL 34695

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Guy D. Pearson

Typed or printed 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)

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DIVISION OF CORPORATIONS
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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Guy Pearson Consulting & Design, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1003 Chillum Court

Safety Harbor, FL 34695

Mailing Address:

PO Box 653

Safety Harbor, FL 34695-0653

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Guy D. Pearson

Name

1003 Chillum Court,

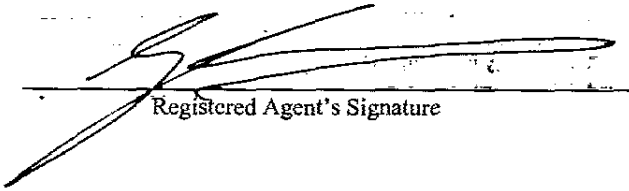
Florida street address (P.O. Box **NOT** acceptable)

Safety Harbor

FLORIDA 34695

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

04/11/12
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DIVISION OF CORPORATIONS