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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Ph Douglas put Company name in Which I w-1704

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TRANSMITTAL LETTER

	gistration Section vision of Corporations			
SUBJECT:	Keystone Construction East Coast, LLC			
	(Name of Limited Liability Company)			
The enclose	d Articles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
	Adam T. Nevius		_	
	(Name of Person)			
	(Firm/Company)			
	112 Eddy Lane			
	(Address)			
	Port Orange, FL 32129			
	(City/State and Zip Code)	_		
For further	information concerning this matter, please call:			
Douglas J				
	(Name of Person) (Area Code & Daytime Telephone Number)	AA AA	40	
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	STREET ADDRESS: MAILING ADDRESS:	, Z	ب	

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Keystone Construction	East Coast, LLC
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
136 W Granada Blvd	136 W Granada Blvd
Ormond Beach, FL 32174	Ormond Beach, FL 32174
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	
Adam T. Nev	ius ASS
Name	
112 Eddy La	
Florida street address (P.O	Box NOT acceptable)
Port Orang	
City, State, a	nd 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

Page 1 of 2 (CONTINUED)

ARTICLE	IV.	Manager	a) or	Managing	Member	(e)	٠.
ANICHE	1 Y -	MARGIN	3) VI	MARIARINE	MICHIDGI	וכו	١.

The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:			
"MGR" = M					
"MGRM" = 1	Managing Member				
MGRM		Adam T. Nevius			
		112 Eddy Lane			
		Port Orange, FL 32129			
					
	-				
		.			
	<u> </u>				
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(Lise attachn	nent if necessary)				
(OSC attacing	ient ii necessary)				
NOTE: An	additional article must be	added if an effective date is requested	S 8		
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REQUIRE	SIGNATURE;	AH AH		-11	
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	PL 1/	miles of the second		ILED	
	Signature of a member or an a	uthorized representative of a member.	AM ID: 37	D	
	(In accordance with section 608	408(3) Florida Statutes the execution	<u>5</u>		
	(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 tra	ue.)	> 111		
	Adam	ı T. Nevius			
		inted 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)