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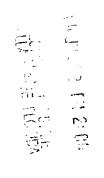
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Miniat-Works, 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:	
Lisa Ingle	
(Name of Person)	
Lawhorn & Associates, PLLC	
(Firm/Company)	
6312 Kingston Pike, Suite 100	
(Address)	
Knoxvillė, TN 37919	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Lisa Ingle 865 212-4867	
(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 10 14 22 CH 2: 0h

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CL#1965 enclosed

Fdg=1 ID # 20-1208609

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Miniat-Works, LLC			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company			
Principal Office Address:	Mailing Address:		
137 12th Street	P.O. Box 7		
Apalachicola, FL 32320	Port St Joe, FL 32457		
	ered Office, & Registered Agent's Signature:		
The name and the Florida street address of the	he registered agent are:		
Stephen J Mini	Lat		
	ame		

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..

City, State, and Zip

Apalachicola, FL 32320

FLORIDA

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:

tle:	Name and Address:	
IGR" = Manager		
IGRM" = Managing Member	an a martine	
MGRM	Stephen J Miniat	
	137 12th Street	
	Apalachicola, FL 32320	
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.)

Stephen J Miniat

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)