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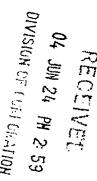
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## TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations			
	Division of Corporations			
SUBJE	CT: WARD CONSTRUCTION & CONSULTING, L.L.C.			
	(Name of Limited Liability Company)			
The enc	closed Articles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
	<b></b>	0		
RICHARD A. GLOVER, C.P.A., P.A.			01, JUN 21,	1
	(Firm/Company)	ASS	24	
	POST OFFICE BOX 12612	E C	7	
-	(Address)	1.01 V.I.S	ယ့	
	TALLAHASSEE, FLORIDA 32317	PASS.	رب در	
	(City/State and Zip Code)	_ `	•	
For furt	her information concerning this matter, please call:			
	RICHARD A. GLOVER, CPA, PA at 850 422-1042			
	(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

WARD CONSTRUCT	rion & cons	ULTING, L.L.C.
ARTICLE II - Address: The mailing address and street address	of the princip	al office of the Limited Liability Company is
Principal Office Address:	244	Mailing Address:
255 FIRE ESCAPE ROAD		POST OFFICE BOX 607
ST. MARKS, FLORIDA 32355		ST. MARKS, FLORIDA 32355
		· · · · · · · · · · · · · · · · · · ·
ARTICLE III - Registered Agent, R The name and the Florida street addres		ice, & Registered Agent's Signature: ered agent are:
The name and the Florida street addres	s of the regist A. GLOVER,	ered agent are:
The name and the Florida street addres	s of the regist	ered agent are:
The name and the Florida street addres  RICHARD  1809 MICCOSUKE	A. GLOVER, Name E COMMONS	C.P.A., P.A.  DRIVE, #108
The name and the Florida street addres  RICHARD  1809 MICCOSUKE	A. GLOVER, Name E COMMONS	C.P.A., P.A.  C.P.A., P.A.  C.P.A., P.A.  C.P.A., P.A.  C.P.A., P.A.

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			
MORIN — Managing Menibel			
"MGRM"	JAMES T. WARD	-	34 Å
	POST OFFICE BOX 607	<u></u>	
	ST. MARKS, FLORIDA 32355	<u>·</u> ·	
"MGRM"	CHARLES E. BARTLETT		
	205 NORTH DELLVIEW DRIVE		
	TTALLAHASSEE, FLORIDA 32303	<u> </u>	
"MGRM"	CHRISTOPHER A. VAILLANCOURT		
	POST OFFICE BOX 122		
	ST. MARKS, FLORIDA 32355	<u> </u>	
		_	-
		· ·	
(Use attachment if necessary)		_	
•			
NOTE: An additional article must be	added if an effective date is requested.		
110 1 2. An additional at fiele must be		_	
REQUIRED SIGNATURE:	FE	DIA JUN 24	ending.
11-11 AC	AR AR	$\subseteq$	3 %
Signature of a member over or	uthorized representative of a member.	2	2
•	<u> </u>		B
(In accordance with section 608.	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury	=	1 1 1
that the facts stated herein are tru	initination under the penalties of perjury	ှု ယူ	
RICHARD A.C	El war	1 To	
Typed or pri	nted 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)