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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations And Division of Corporations	 LL C		
SUBJECT: DIVOU 9/1	24 —		
(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:			
Jorge Rosa (Name of Person)			
Jand R.			TALLAHASS
(Firm/Company)			
POBOX 466		·	AMIL: 05
(1991033)			>
Gretna FL. 32332 (City/State and Zip Code)	٠		

For further information concerning this matter, please call:

Name of Person) at (850) 528-9163 (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

ARTICLE I - Name:

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The name of the Limited Liability Company is:

and R. Drywal ILC. ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:

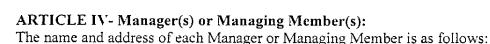
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: Signature:

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

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, F.S.

(CONTINUED)



Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

JOV & ROS Q

53 49 Granboro How/z

Guincy Ft. 32351

MGRM

Parae/ Salazar

250 Bill: Jashar Ro.

Guincy Ft. 32351

(Use attachment if necessary)

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

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

REQUIRED SIGNATURE:

Signature of a member or an authorized representation 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.)

Responsible 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)