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11/03/04



## Gary W. Rountree

### Mobile Welding & Fabrication

3302 Midway Road, Plant City, FL 33565 (813) 719-9697 Home (813) 376-2076 Cell

#### **FAX TRANSMITTAL**

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#### TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations

The enclosed Articles of Organization and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to the following.

For further information concerning this matter, please call:

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Taliahassee, Florida 32399 MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327

Tailahassee, Florida 32314

ARTICLE 1 - Name:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
CHICHE Pauntrec's Weldi	ng & FAbrication LL
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Bury Rountres	3302 michoay Rd Plant City Fla 33565
*	
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the n	egistered agent are:
GATY W. Rock	Office, & Registered Agent's Signature: 7 7 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
3302 Midu	44 hx.
Fiorida street address (P.O	•
- Hawt Gty City, State, a	FLORIDA
Cfty, State, a	nd Zin

Having been named as registered agent and to accept vervice 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 Mana The name and address of each Manage	iging Member(s):	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
M. 6. 12	Bury W. Rountres 3302 Midway Rd. Hant City Flu 38565	
		غيجم
(Use attachment if necessary)  NOTE: An additional article must l	be sadded if an effective date is requested.	
Signature of a member of an	suthorized representative of a member.  On 400(2) Florida Sugues, the execution	
that the facts stated herein are	raffirmation under the penalties of perjury  Puch  Fountres  printed name of signee	

Filing Fees: \$100.06 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)