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2004 DEC 27 AM 8: 34
SECRETARY OF STATE
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'WH 93484

TRANSMITTAL LETTER

To:	Registration Section Division of Corpora		
Subje		C & E Construction, LLC ame of Limited Liability Company)	<u></u>
The e	nclosed Articles of Or	ganization and fee(s) are submitted for filing.	
	Please return all co	rrespondence concerning this matter to the following:	
		David D. Murphy, Sr. (Name of Person)	
		C & E Construction, LLC (Firm/Company)	
		P. O. Box 643 (Address)	SECRI
		Warsaw, FL 32463 (City/State and Zip Code)	E TARKERS
For f	urther information con	cerning this matter, please call:	HAN.
Davi	d D. Murphy (Name of Persor	at 850-638-5771 (Area Code & Daytime Phone Numb	er)

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 13, 2004

DAVID MURPHY, SR. P.O. BOX 643 WARSAW, FL 32463

SUBJECT: C & E CONSTRUCTION, LLC

Ref. Number: W04000045452

We have received your document for C & E CONSTRUCTION, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 404A00069380

TRANSMITTAL LETTER

То:	Registration Section Division of Corpora		
Subj		& E CONSTRUCTION, LLC Name of Limited Liability Company)	
The e	enclosed Articles of O	rganization and fee(s) are submitted for filin	·g.
	Please return all co	orrespondence concerning this matter to the	following:
		David Murphy, Sr. (Name of Person)	
		C & E Construction, LLC (Firm/Company)	
		PO Box 643 (Address)	
		Wassau, FL 32463 (City/State and Zip Code)	2004 DEC 27 SECRETARY
For f	urther information co	ncerning this matter, please call:	C 27 AH 8: 34 ETARY OF STATE HASSEE, FLORID
<u>Davi</u>	d Murphy, Sr.	at 850-638-5771	
	(Name of Person	n) (Area Code & Daytime Ph	ione number)

STREET ADDRESS:

(Name of Person)

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:

The name of the Limited Liability Company is: C & E Construction, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2747A Jefferson St. Wassau, FL 32463

P.O. Box 643 Wassau, FL 32463

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature The name and the Florida street address of the registered agent are:

David Murphy, Sr. Name

2747A Jefferson St.
Florida street address (P.O. Box NOT acceptable)

Wassau, FL 32463 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 accepts 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 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:

Title:

Name and Address:

"MGR" - Manager

"MGRM" - Managing Member

MGRM

David Murphy, Sr. PO Box 643

Wassau, FL 32463

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.)

David Murphy, Sr.
Typed or printed name of signee

SECRETARY OF STATE