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TRANSMITTAL LETTER

| TO: Registration Se Division of Cor | | | | |
|--|--|--|---|-----------|
| SUBJECT: | C QUEEN PESIS (Name of Limited I | iability Company) | PNETRUCTION CO | WES LITAY |
| The enclosed Articles of | Organization and fee(s) are subr | nitted for filing. | | |
| Please return all correspo | ondence concerning this matter to | o the following: | | |
| | LA POPERICK E. (Nar | MEQUEEN me of Person) | | |
| | 15 QUEEN PEG | SIGHS LLC Com/Company) | ONSTRUCTION C | ONS VLTA |
| | 229 HEML | EY LOOP | | |
| | TALLA HASSES (City/State) concerning this matter, please call K MEQUEEN at | E, FL 32312 até and Zip Code) | SECRETARY OF STATE TALLAHASSEE, FLORIDA | |
| (Name | of Person) r the following amount: | (Area Code & Daytime Te | lephone Number) | |
| □ \$125.00 Filing Fee | ☐ \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$160.00 Filing Certificate of Status Certified Copy (additional copy is enclo | s & |
| Registi Divisio 409 E. | ET ADDRESS: ration Section on of Corporations Gaines Street assee, Florida 32399 | MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F | ection orporations | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: |
|--|
| MEQUEEN PESISMS & Construction Consultantil |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: |
| Principal Office Address: Mailing Address: |
| 229 HEIGLEY LOOP 229 HEIGLEY LOOP TAMAHASSEE, FL 22312 TAMAHASSEE, FL 52312 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: LAROPERIAL E. M.: QUEEN Name 129 Hemley Lood Florida street address (P.O. Box NOT acceptable) (DUANASSEE FL 32312 City, State, and Zip TOWN TOWN TOWN TOWN TOWN TOWN TOWN TOWN |

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..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows:

| Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|--|--|
| MARM | LAPODEFICK MEQUEEN 229 HEMLEY LOOP TALLAHASSEE, FL 32312 |
| Marm | KEISHAR MEQUEEN 229 HEMLEY LOOP TALLAHASSEE, FL 32312 |
| | |
| (Use attachment if necessary) NOTE: An additional article must be | e added if an effective date is requested. |
| Signature of a member of this document constitute that the facts stated here | or an authorized representative of member. on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury |
| Туре | d or printed name of signee |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)