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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tee Fort Construction LLC (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:
Erick Preuciznik (Name of Person)
Trei Firt Construction LLC
(Firm/Company) 2101 Bakuma Drive (Address)
(Address)
Mavarre, TL 32566 (City/State and Zip Code)
For further information concerning this matter, please call:
1 Evence Scalage at (850) 485-5336 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & \$\Bigcup \\$155.00 Filing Fee & \$\Bigcup \\$160.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	S:		
Tree Fort Cons	truction	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	<u>:</u>	
2101 Bahama Drive Navarre, FL 32566	2101 Ba Novarre	huma Drive	-
ARTICLE III - Registered Agent, Register	ed Office, & Register	red Agent's Signa	ture:
The name and the Florida street address of the			
	oznik		
Nam	ne `		
2101 Bokana Drive	2		
Florida street a	address (P.O. Box <u>NOT</u> ac	ceptable)	
Pavai	Ve_FL 32566)	
City, State	e, and Zip		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete accept the obligations of my position as referenced Registered Agent	n this certificate, I here city. I further agree to performance of my dut gistered agent as prove nt's Signature	by accept the appoi comply with the pro ties, and I am famili	intment as ovisions of all aPwith and
(CONTI	INUED)		

Page 1 of 2

ARTICLE IV- Manager(s) or Manager The name and address of each Manager			
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MER_	Erick Prevoznik DIOI Byhama Drie Mavoire, FL 32566		
InGRM	Terence Bucklay 2101 Balkina Drivel Murgine, FL 32566		
(Use attachment if necessary)			
NOTE: An additional article must be	added if an effective date is requested		
REQUIRED SIGNATURE:			
Signature of a member of	r an authorized representative of a member.		
of this document constitute that the facts stated here		SEL	2003
——————————————————————————————————————	Prevoznik or printed name of signee	AHA	5

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)