

L050000/7739

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2005 FEB 17 P 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

2005 FEB 17 P 2: 35

SUBJECT: OK Concrete, LLC
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

Jeremy Crocker
(Name of Person)

OK Concrete, LLC
(Firm/Company)

1553 Providence Blvd
(Address)

Deltona, FL 32725
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeremy Crocker at (386) 561-0215
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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 OR ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED

2005 FEB 17 P 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I – Name:

The name of the Limited Liability Company is:

OK CONCRETE, LLC.

ARTICLE II – Address:

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

Principal Office Address:

***1553 PROVIDENCE BLVD
DELTONA, FL 32725***

Mailing Address:

***1553 PROVIDENCE BLVD
DELTONA, FL 32725***

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

Name: ***GEREMY CROCKER***

Street Address (P.O. Box not acceptable): ***1553 PROVIDENCE BLVD***

City, State, and Zip: ***DELTONA, FL 32725***

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, Florida Statutes..



Registered Agent's Signature

(CONTINUED)

FILED

2005 FEB 17 P 2:35

ARTICLE IV – Manager(s) or Managing Member (s):

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

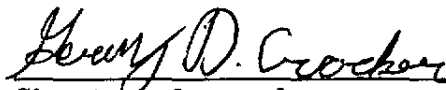
Name and address:

MGRM

**GEREMY CROCKER
1553 PROVIDENCE BLVD
DELTONA, FL 32725**

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.)

Jeremy Crocker

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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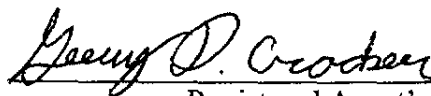
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

“MGR” = Manager

“MGRM” = Managing Member

Name and address:

MGRM

**GEREMY CROCKER
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DELTONA, FL 32725**

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Jeremy Crocker

Typed or printed name of signer