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## TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: TE Salazar Masury 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:		
JOSE E. Salazar (Name of Person)		
JE Salazar Masonry  (Firm/Company)	90	
1117 Beiten Ave SE (Address)  (Address)	05 MAR -7 (	4
At lanta GA 30912 (City/State and Zip Code)	PH 2: 03	
For further information concerning this matter, please call:		
Maria L. Martinez at (404) 627-0231 (Name of Person) at (404) baytime Telephone Number)		
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee,  Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed)  Certified Copy (additional copy is enclosed)		
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines Street  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327		

Tallahassee, Florida 32399

Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
JE Salazan -Mas	ring 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:
1117 Benteen tvc St Atlanta, GA 30312	
ARTICLE III - Registered Agent, Registered Office	e, & Registered Agent's Signature:
The name and the Florida street address of the register  TOSE E. SAIGENAME  Name  4000 WOODIANE  Florida street address (P.O. Box M.)  TAIIANG SSECFL FL  City, State, and Zip	Circle Circle

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)

ARTICLE IV- Manager(s) or Man The name and address of each Manager	aging Member(s): ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	JOSE E. Sa. 1 G. 7 OF 1117 Bent-en Ave SE Atlanta, GA 303/2
<del></del>	
(Use attachment if necessary)  NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	SSEE, FL
Signature of a memt	S Sa San B S S S S S S S S S S S S S S S S S S
(In accordance with s of this document conthat the facts stated h	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
Jose E	yped or printed name of signee

\*

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)