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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 13, 2004

VIRGIL R SHADDOX  
4234 BANNON RD  
PANAMA CITY, FL 32404

SUBJECT: VIRGIL SHADDOX DRYWALL LLC  
Ref. Number: W04000030959

We have received your document for VIRGIL SHADDOX DRYWALL 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):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on August 12, 2004. Please amend your document accordingly.

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) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 304A00050217

2004 MAR 10 PM 2:47

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VIRGIL SHADDOX DRYWALL 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:

VIRGIL R. SHADDOX  
(Name of Person)

VIRGIL SHADDOX DRYWALL LLC  
(Firm Company)

4234 BRANNON RD  
(Address)

DANAMA CITY FL. 32404  
(City/State and Zip Code)

For further information concerning this matter, please call:

VIRGIL R. SHADDOX at (850) 832-5293  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

SECRET  
TALLAHASSEE, FLORIDA

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FORM 330

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

VIRGIL SHADDOX DEYWALL LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

4234 BRANNON RD  
PANAMA CITY, FL 32404

**Mailing Address:**

VIRGIL SHADDOX  
4234 BRANNON RD  
PANAMA CITY, FL 32404

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:


VIRGIL R. SHADDOX  
Name

4234 BRANNON RD  
Florida street address (P.O. Box **NOT** acceptable)

PANAMA CITY, FL 32404  
City, State, and Zip

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FBI  
TALLAHASSEE, FL  
SECURITY DIVISION

*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 Managing Member(s):**

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

VERGIL R. SHADDOX  
4234 BRANNON RD  
PANAMA CITY, FL, 32404

(Use attachment if necessary)

**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.)

VERGIL R. SHADDOX

Typed 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)**

FILED  
2005 MAR 10 PM 2:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA