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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: A. J. Anderson 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:
Alonza Anderson (Name of Person)
A. J. Anderson Construction LLC (Firm/Company)
7326 Arble Drive (Address)
Jacksonville, FL 32211 (City/State and Zip Code)
For further information concerning this matter, please call:
Tacks on ville, FL 32211 (City/State and Zip Code) For further information concerning this matter, please call: Alonza Anderson at 904 891-9800 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\sigma\$ \$\s
STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations

409 E. Gaines Street Tallahassee, Florida 32399 Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
A. J. Anderson Construction 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:
7326 Arble Drive 7326 Arble Drive Jacksonville, FL 32211 Jacksonville, FL 32211
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Alonza Anderson Name 7324 Achle Deive
Florida street address (P.O. Box NOT acceptable)
Jacksonville FL 32211 8
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.

(CONTINUED)

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	-
MGRM	Alonza Damaal Anderson
	1326 Arble Drive
	Jacksonville, FL 32211
(Use attachment if necessary)	
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NOTE: An additional article	must be added if an effective date is requested.
REQUIRED SIGNATURE:	AL 54
	
	Along Gamen Anderson nember of an authorized representative of a member.
Signature of a p	nember of an authorized representative of a member.
	with a continue (09 409(2) Florida Statutas the averaging
of this documen	vith section 608.408(3), Florida Statutes, the execution t constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Alonza Jamaal Anderson Typed or printed name of signee