

Division of Corporations Public Access System

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000082630 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number = (850) 205-0383

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Num
O Phone
E Fax Number Account Number : I20000000146

: (305)444-4994

: (305) 444-4977

LIMITED LIABILITY COMPANY

FORMCRETE MANAGEMENT LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Bhatronic Pling Mary.

Comprete Filipa

Public According

(((H05000082630)))

FILED

2005 APR -5 A 8:57

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	the results of
The name of the Limited Liab	pility Company is:
FORMCRETE MANAGEMENT	ıc
ARTICLE II - Address: The mailing address and stree	t address of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
327 SW 2ND AVE	327 SW 2ND AVE
FLORIDA CITY FL 33034	FLORIDA CITY FL 33034
The name and the Florida stre	et address of the registered agent are: ROMAN PILOTO JR.
	Name
	327 SW 2ND AVE
**************************************	Florida street address (P.O. Box NOT acceptable)
	FLORIDA CITY FL 33034
	City, State, and Zip
liability company at the pla	ered agent and to accept service of process for the above stated limited ace designated in this certificate, I hereby accept the appointment as act in this capacity. I further agree to comply with the provisions of al
statutes relating to the prope	er and complete performance of my duties, and I am familiar with and my position as registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature

Page 1 of 2

(((H05000082630)))

FILED

<u>Title:</u>	, was 6
"MGR" = Manager "MGRM" = Managing Member	er or Managing Member is as follows: A 8: 5: Name and Address: TALLAHASSEE, FLORI
MGRM	ROMAN PILOTO JR.
	327 SW 2ND AVE
	FLORIDA CITY FL 33034
	·
	
<u> </u>	
Use attachment if necessary)	
and according to the second se	
VOTE: An additional article must b	be added if an effective date is requested.
	•
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
X	
REQUIRED SIGNATURE:	or an authorized representative of a member.
Signature of a member (In accordance with secti	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury
Signature of a member (In accordance with section of this document constitution that the facts stated here	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury
Signature of a member (In accordance with section of this document constitution that the facts stated here	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury trein are true.)

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)