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Division of Corporations

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To:

Division of Corporations

Fax Number :

: (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

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LIMITED LIABILITY COMPANY

Maslar Construction LLC

| Certificate of Status | 0 |
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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

Masiar Construction LLC

ARTICLE II ADDRESS

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

17 Poplar Way Santa Rosa Beach, Florida 32459

ARTICLE III REGISTERED AGENT, REGISTER ED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the regi tered agent is:

A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FLORIDA 32351

Having been named as registered agent to accept sorvice of process for the above stated limited liability company at the place c esignated 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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A1A REGISTERED AGENT INC. / Registered Agent's Signature

ARTICLE IV MANAGEMENT

The Limited Liability Company will be managed by the or more managing members and is, therefore, a Member Managed Company.

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Masiar Construction LLC PAGE 2

ARTICLE Y

The name(s) and address(es) of the managing members of the LLC are:

MANAGING MEMBER: 17 Poplar Way

Richard Masiar

Santa Rosa Beach, Florida 32459

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 senalties of perjury that the facts stated herein are true.)

Richard Mastar

Typed or printed name of signee

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