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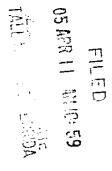
(Re	questor's Name)	
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	y/State/Zip/Phone	9 #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
,	·	,
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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T. Brumbley APR 1 3 2005

## TRANSMITTAL LETTER

TO: Registration Se Division of Cor						
SUBJECT: A&G Con	crete Pumping LLC (Name of Limite)	d Liability Com	nanu)		<del>-</del>	
	(Name of Limite	d Liaomity Com	Daily)			
The enclosed Articles of	Organization and fee(s) are so	ubmitted for fili	ng.			
Please return all correspondent	ondence concerning this matte	er to the following	ıg:			
Katherine		N C.D				
	(ı	Name of Person)				
A&G Concrete Pump	~					
	(	Firm/Company)				
1212 N. 18ti	h St					
·		(Address)				
Immo	koloo El 34142					
	kalee, FL 34142	State and Zip Coo	le)		05	
	(4.4)		,	المراجع	Resident	
For further information of	concerning this matter, please	call.			05 APR 11 ANIO: 59	=
	, p				שכייי מ	i
Katherine Valdez		at ( 239	, 470-2291	يان چينه چينهان د	<u> </u>	O
(Name	of Person)	(Area Co	de & Daytime To	elephone Number)	س	
				ΘĀ	- 6	
Enclosed is a check fo	r the following amount:					
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 l Certified Co (additional cop	ру			
		•	•	(additional copy is er	closed)	
<del></del>						
	ET ADDRESS: ration Section		MAILING A Registration S			
Division of Corporations Division of Corporations						
409 E.	Gaines Street		P.O. Box 6327	7		

Tallahassee, Florida 32314

409 E. Gaines Street Tallahassee, Florida 32399

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
A&G Concrete Pumping LLC	<del></del>
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1212 N. 18th St Immokalee, FL 34142	1212 N. 18th St. Immokalee, FL 34142
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the r	registered agent are:
Katherine Valdez Name	
1212 N. 18th St Florida street add	dress (P.O. Box NOT acceptable)
Immokalee FL 34142 City, State, a	FL and Zip

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:
MGRM	Katherine Valdez 1212 N.18th St Immokalee, FL 34142
(Use attachment if necessary)	
(In accordance with section of this document constitute; that the facts stated herein	an authorized representative of a member.  608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury

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)