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SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Above Av	eruge Concrefo Limited Likbility Company)	ejlu_
The enclosed Articles of Organization and fee(s	are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
<u> </u>	(Name of Person)	
Above Average	e Concrete (Firm/Company)	
4598 Peppera	rass St.	FILE FILE
Middleburg	Florida 32 (City/State and Zip Code)	PM 3: 38 PM 3: 38
For further information concerning this matter, p	lease call:	
Dyann Phillips (Name of Persoh)	at (904) 291 - (Area Code & Daytime T	- 73 %5 'elephone Number)
Enclosed is a check for the following amoun	t:	
\$125.00 Filing Fee \$130.00 Filing Fe Certificate of Status	ce & \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING A	.DDRESS:

Registration Section Division of Corporations 409 L. Gaines Street Tallahassee, Florida 32399

Registration Section
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:	
Above Average C	oncrete, LLC
ARTICLE II - Address:	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4598 Peppergrass St. Middleburg, Florida 320018	4592 Peppergrass St. Mildleburg, Florida 32068
ARTICLE III - Registered Agent, Registered	
The name and the Florida street address of the re	egistered agent are:
Dyann Phill	Lips PER PET
wame	
4598 Peppera	ress (P.O. Box NOT acceptable) FL 32068
	PI 32.048 PRINT 38
City, Stale, a	FL 32068 PFF 38
liability company at the place designated in the registered agent and agree to act in this capacity	accept service of process for the above stated limited his certificate, I hereby accept the appointment as to I further agree to comply with the provisions of all aformance 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: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
mgR	Dyann Phillips 4598 Peppergrass St. Middleburg, Fl. 32068
(Use attachment if necessary)	OS APR 1
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	STATE 38

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Dyana Phillips
Typed or printed name of signee

Filing Fces:

\$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)