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EFFECTIVE DATE

TRANSMITTAL LETTER

Division of Cor				
SUBJECT:	Lamar Waltman	n Construction, LLC		
	(Name of Limited	1 Liability Company)		
The enclosed Articles of	Organization and fee(s) are su	ubmitted for filing.		
Please return all correspondence	ondence concerning this matte	r to the following:		
		erly L. Waltman		
	(1)	Name of Person)		
	Lamar Wa	ıltman Construction, LLC		
		Firm/Company)		
			į.	
1216 Lexie Drive				
		(Address)	05 M	
	Crest	view, Florida 32536	05 MAY -6 PH 3: 34	
(City/State and Zip Code)				
		,,	<u> </u>	
For further information of	concerning this matter, please	caii:	SIDA AIDA	
	y L. Waltman	at (850)689-3		
(Name	of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check fo	r the following amount:			
□ \$125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	☐ \$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		
Registration Section Division of Corporations 409 E. 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:

Lamar Waltman Construction, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

Lamar Waltman Construction, LLC 1216 Lexie Drive Crestview, Florida 32536

Lamar Waltman Construction, LLC 1216 Lexie Drive Crestview, Florida 32536

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Kimberly L. Waltman Name

1216 Lexie Drive Florida street address (P.O. Box NOT acceptable)

> Crestview, FL 32536 City, State, and Zip

Having been named as registered agent and to accept service of process for the above state [Limited] Liability Company at the place designated in this certificate, I hereby accept the appointment are registered agent and agree to act in this capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and I am familiar and accept obligations of my position as registered agent as provided for in Chapter 608, F.S..

Kunkerly d. Waltman
Receistered Agent's Signature

(CONTINUED) Page 1 of 2

ARTICLE IV - Manager(s) or Managing Member(s):

The name, address, and signature of each Manager or Managing Member is as follows:

<u>Title:</u>
"MGR"= Manager

"MGRM" = Managing Member

<u>MGR</u>

Lamar N. Waltman 1216 Lexie Drive Crestview, Florida 32536

Name and Address:

MGR

Kimberly L. Waltman 1216 Lexie Drive Crestview, Florida 32536

Lamet Walton

Manager or Managing Member Signatur

Manager of Managing Member Signature

ARTICLE V- Effective Date

The effective date for the Limited Liability Company is:

(5/05/2005) Thursday, the Fifth day of the fifth month, in the year two thousand and five

REQUIRED SIGNATURE:

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

Kimberly L. Waltman
Typed or printed name of signee

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)