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| (Requestor's Name) | | | | |
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| (Address) | | | | |
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| (Address) | | | | |
| V. Maraos, | | | | |
| (Cit. 10t. st. 77: 10t 49 | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| (Business Enuty Name) | | | | |
| | | | | |
| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

| | tration Section on of Corporations | |
|------------------|---|----------------------------|
| SUBJECT: _ | | |
| The enclosed A | articles of Organization and fee(s) are submitted for filing. | |
| | Please return all correspondence concerning this matter to the following: | |
| | James Blue | |
| | (Name of Person) | |
| | Thompson Construction Company, LLC | |
| | (Firm/Company) | |
| | 22400 Front Beach.Road Unit #72 (Address) | |
| | , , | |
| | Panama City Beach, Florida 32413 | 95 Sivid |
| | (City/State and Zip Code) | SECRETARY IVISION OF C |
| For further info | rmation concerning this matter, please call: | ⊃ુતા |
| James | ac (ac () | OF STA |
| | (Name of Person) (Area Code & Daytime Telephone Number) | STATE PRATIONS 3: 36 |

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Thompson Construction Company, LLC | | | | |
|---|--|--|--|--|
| fice of the Limited Liability Company is: | | | | |
| Mailing Address: | | | | |
| 22400 Front Beach Road | | | | |
| Unit #72 | | | | |
| Panama City Bch, FL 32413 | | | | |
| Registered Agent's Signature: OS SECRET | | | | |
| 1 OF CAN | | | | |
| Unit #72 99 AA | | | | |
| acceptable) ω | | | | |
| DA 32413 | | | | |
| | | | | |

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

| The name and address of each Manag | ger or Managing Member is as follows: |
|--|---|
| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
| MGRM | James Blue 22400 Front Beach.Rd., Unit #72 Panama City Beach, FL 3243 |
| | |
| (Use attachment if necessary) | |
| | |

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

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member of 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.)

James Blue

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)