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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Affordable (Name of Limite)	Masonry and Repair d Liability Company)
The enclosed Articles of Organization and fee(s) are su	abmitted for filing.
Please return all correspondence concerning this matter	r to the following:
Kevin Les	Name of Person)
· ·	Masoury and Repair
1206	(Address) State and Zip Code) State 2 Amount of the control of t
32304	State and Zip Code)
(City/	State and Zip Code)
For further information concerning this matter, please of	
Kevin Pennington (Name of Person)	at (850) 576-3669 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Affoldabla Maso	only and Repair LLC.	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1206 Elm Pd Tully Fla, 32304	5ame .	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	gistered agent are:	
Kevin Penn	ing ton	
Florida street addr Talla Fla City, State, an	ess (P.O. Box NOT acceptable) FL 32304/ d Zip PL 32304/ PL 32304	
liability company at the place designated in th	scept service of process for the attove stated limited is certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of	

Registered Agent's Signature

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.

(CONTINUED)

Page 1 of 2

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MARM	Jeffrey Wayne Head
MSIRM	302 North Caunty Line K Sylvester Ga, 31791
	Edward Eugene Burch
	Tallahassee, FL
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
	i Penny L. 9:
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury sin are true.) In Penning for dorprinted 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)