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(Ad	ddress)	
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(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Na	me)
(Dc	ocument Number)
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations	
SUBJE	ECT: EIB General Contractors, LLC (Name of Limited Liability Company)	
The en	closed Articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	Jeff White (Name of Person)	
	(Name of Person)	
	EIB General Contractors. LLC (Firm/Company)	
<u>15</u>	33 Red Bud Ct.	_
	(Address)	
	Orange Park, Florida, 32073-4644	
	(City/State and Zip Code)	
For fur	ther information concerning this matter, please call:	
Jeff W (Name	of Person) Area Code & Daytime Phone Area Code & Daytime Phone	T
	The second se	-

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:	
EIB General Contractors, LLC.		····
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
1533 Red Bud Ct.	1533 Red Bud Ct.	
Orange Park	Orange Park	
Florida 32073	Florida 32073	
ARTICLE III - Registered Agent, Register The name and the Florida street address of th Jeff White 1533 Red Bud Ct.	red Office, & Registered Agent' e registered agent are:	TALLAHASSER
	P.O. Box NOT acceptable)	P 2: 1
Orange Park	FLORIDA 32073	
City, St	tate, 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

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s	or!	Managing	Member	(s):
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The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Jeff White 1533 Red Bud Ct. Orange Park Fl. 32073	_ _ _ _	
	TALL AND THE SECOND SEC	ZUOS AUG	
(Use attachment if necessary)	A)	18 PD	
NOTE: An additional article must be add	led if an effective date is requested.	SEAT	`
REQUIRED SIGNATURE:	1 was	7 1	
(In accordance with sec	or an authorized representative of a member. etion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury ein are true.)		
Jeff White Ty	ped 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)