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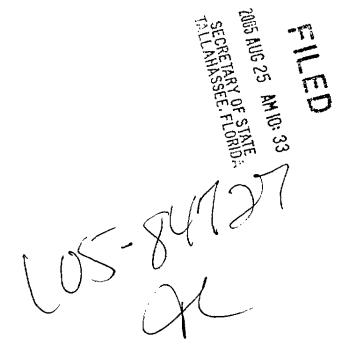
(Requestor's Name)	
(Address)	
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(City/State/Zip/Pl	none #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Number)	
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Lighting Bolt Drywall "L.L.C."
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rudolph Scott Gilbert SR. (Name of Person)
Lighting Bolt Dajwall "L. L. C."
569 Libby Alico Rd
Babson, Park Fl. 33827 (City/State and Zip Code)
For further information concerning this matter, please call:
Rudolph Scott Gilbert SiR at (863) 638-1536 PM B (Area Code & Daytime Telephone Number) PM
Enclosed is a check for the following amount:
S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section MAILING ADDRESS: Registration Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32399

409 E. Gaines Street

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lighting Bolt DrywALL "limited liability company"

ARTICLE II - Address:

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

Principal Office Address:

Rudolph Scott Gilbert JR. 569 Libby Alice Rd Babson, Park Fl. 33827 Mailing Address:

Rudolph Scott Gilbert SR 569 Libby Alico Rd Babson, Purh Fl. 37827

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

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

"MGR" Rudolph Scott Gilbert S.R.
Name

569 Libby Alico Kd.

Florida street address (P.O. Box NOT acceptable)

Babson Park FL 33827

City, State, 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

(CONTINUED)

Page 1 of 2

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
"MGR"	Rudolph Scott Gilbert S.R. 569 hibby Alico Rd Babson Park Fl. 33927
"MGRM"	Paul E. Gilbert S.R. 569 hibby Alico Rd Babson, Park Fl. 33827
"MGRM"	Sheila R. Barton 569 Libby Alico Rd Babson, Part Fl, 33827

(Use attachment if necessary)

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

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.)

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)