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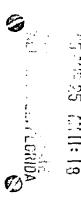
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 16, 2005

LEON A. WOOD 18260 S.E. 54TH PLACE OCKLAWAHA, FL. 32179

SUBJECT: HEAVY METAL WELDING

Ref. Number: W05000038609

We have received your document for HEAVY METAL WELDING and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist

Letter Number: 805A00052200

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: HEAUX METAL WELDING (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:
LEON A. Wood (Name of Person)
HEAVY METAL WELDING (Firm/Company)
18260 - S.E. 54th PLACE (Address)
Ocklawaha FL. 32179 (City/State and Zip Code)
For further information concerning this matter, please call:
For further information concerning this matter, please call: LEON A. Wood (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount:
Enclosed is a check for the following amount: \$\Begin{array}{c} \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy} & Certificate of Status & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S155.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Copy (additional copy is enclosed)} \$\Begin{array}{c} \text{S160.00 Filing Fee & Certified Copy} & Certified Cop
(additional copy is encosed)

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

ARTICLE I - Name:

ling L.L.C.
incipal office of the Limited Liability Company is
Mailing Address:
19260 - S.E. 54th PLACE

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

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

LEON A. WOOD

Name

18260 - S.E. 54Th PlacE

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

Ocklawaha FL 32179

City, State, and Zip

Having been named as registered agent and to accept service of process for the above styled 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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member

(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.)

EON A. Wood

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)