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M. HODGES

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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations
SUBJI	ECT: DIG HARK - QUINCY 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:
	ARthur Wilcox (Name of Person)
	· · · · · · · · · · · · · · · · · · ·
	(Firm/Company)
	117 Mount Chlvny Church Ro
	Quincy Florida 3235/ (City/State and Zip Code)
For fur	ther information concerning this matter, please call:
AR	Hur Willox _at (850) 627-3043 (Name of Person) (Area Code & Daytime Telephone Number)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
	Ι/,	A		
Dig MACK- QUINCY -	المكار	ノ		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liab	oility Com	pany is:		
Principal Office Address: Mailing Address:	rgCh.	uch K		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
The name and the Florida street address of the registered agent are:				
Arthur F. Wilcox -				
Florida street address (P.O. Box NOT acceptable) 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				
Pregistered Agent's Signature	-T			
	ECI.	or of the state of		
•	AT AT			
(CONTINUED)	SEE	- I		
Page 1 of 2	FLO			

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

and address of such Manager	or iridiagnig, iridiiloof is as ioilo 170.
Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	Name and Address: ARthur F. Wilcox - No. 111 Maint Calvana Chunch Rose Chunch Flor. 332,332
MGR M	117 Mant Polyon Church Pro
	Caircy Fla. 132352
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Larbara	Ward
	an authorized representative of a member.
of this document constitute	a 608.408(3), Florida Statutes, the execution

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)

Typed or printed name of signee