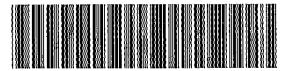
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SECRETARY OF STATE TALLAHASSEE. FLORIDA

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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations FILED

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSEPH W. CoNoley
(Name of Person)
Wes Confoled ILC
(Firm/Company)
7031 OID FEDERAL RD.
(Address)
Qualcy F1, 3235/ (City/State and Zip Code)
(City/State and Zip Code)

For further information concerning this matter, please call:

Name of Person) at (850) 421 - 5125 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$125.00 Filing Fee ☐ \$130.00 Filing Fee &

Certificate of Status

☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

Certificate of Status &

Certified Copy (additional copy is enclosed)

☐ \$160.00 Filing Fee,

Mailing Address

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

Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LA JTY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: JOSEPH W. Consolory 7031 Old Ferrand RD. Quintey El. Florida street address (P.O. Box NOT acceptable) Qualey Fl. FL 32351 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 (REQUIRED)

(CONTINUED)

	lanager or Managing Member is as f	ollows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	05 NOV 21 P
MGRM	JOSEPH W. (7031 Old Fer Quincy Fl.	PORMIZE /
(Use attachment if necessary)		
	must be specific and cannot be m	
REQUIRED SIGNATURE:		
Jusel	(Janual) lember or an authorized representative of	f a member.

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)