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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: A.B.S. OF JACKSONVILLE, INC. Account Name

Account Number : 120010000215 : {904}777-1533 Phone

Fax Number : (904)777-1717

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Lewis Pavers and Stone, LLC

Certificate of Status	1
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Electronic Filing Menu

Corporate Filing Menu

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H06000040933 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME:

The name of the Limited Liability Company is: Lewis Pavers and Stone, LLC

ARTICLE II. ADDRESS:

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

5536 Ken Road Jacksonville, FL 32244

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: Ralph A. Lewis, MGR. 5536 Ken Road Jacksonville, FL 32244

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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 duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter-609, Florida Statutes.

Ralph A. Lewis/ Registered Agent

-/ 4-00

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title: MGR. Name and Address: Ralph A. Lewis 5536 Ken Road Jacksonville, FL 32244 OGFEB 14 AM 9: 19
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ARTICLE V. EFFECTIVE DATE

The effective date of this document shall be February 14, 2006.

REQUIRED SIGNATURE:

(in accordance with section 608,408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

H06000040933 3