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COVER LETTER '

Division of Cor				
subject: <u>Міс</u>	hael Duke (Name of Limited	Liability Company)	110	
The enclosed Articles of	Organization and fee(s) are su	abmitted for filing.		
Please return all correspo	ondence concerning this matter	r to the following:		
_micha	el Eugene	Tuker Name of Person)		· · · 1
Micha	of Tuker	welding Firm/Company)	LLC	
1478	Amherst st			
•		(Address)	•	t
TALL	F/ 32305	State and Zip Code)	4.	4
	(0.13).	5 <u>2.0 2.</u> p 6542,		
For further information of	concerning this matter, please	call:		
michael	Dukes	at (<i>B50</i> 421- (Area Code & Daytime Te	3955	
(Name	of Person)	(Area Code & Daytime Te	elephone Number)	. ≭ -, 3.
Englosed is a check fo	r the following amount:			
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is	•				
Mi'chael Dukes W (Must end with the words "Limited Liability Company, "Limited Liability Company,"	elding .	LLC			
(Must end with the words "Limited Liability Company, "Limi	ted Company" or their	r abbreviation	"LLC," or "L.C.,"	")	
ARTICLE II - Address:					
The mailing address and street address of the p	rincipal office of	f the Limite	ed Liability C	Compan	y is:
Principal Office Address:	Mailing Address:				
Michael Dikas Welden Al	e Michael	1 Dut	la Wel	dina	22
1478 Amharst st	1478 A	mherst"	F		
TAIL FL 32306	Toll	FI	32305	_	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.)					
The name and the Florida street address of the	registered agent	are:	AL!	90	
Michael E	Duker		CRE	MAR	
Name			S.T.	70 10	The second
1478 Amberst	54	· ·	338 34 01	6 PH	
Florida street ac	ldress (P.O. Box <u>NC</u>	<u>)T</u> acceptable	e) <u>T</u> S	ယ္	
Tall Fl	FL 32	305	윤덕	553	
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)
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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGRM (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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

E Dukes
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)