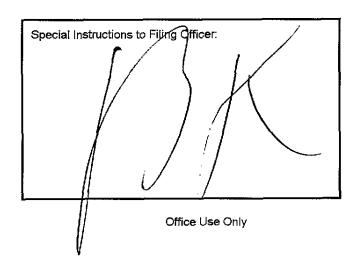
## 106000035371

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status





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DIVISION OF CORPORATION

2006 APR -5 PM 3: 05 SECRETARY OF STATE

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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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				Foreign Corp. File
			<u></u>	L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
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				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			<u>~</u>	Photo Copy
				Certificate of Good Standing
			<u> </u>	Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
O.B.M.				Vehicle Search
				Driving Record
Requested by:	( L . t			UCC 1 or 3 File
	4/5/06	10:55		UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PDG AG MAINTENANCE LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

202 LAID BACK WAY FORT PIERCE, FL 34945 202 LAID BACK WAY FORT PIERCE, FL 34945

THE PROPERTY OF STATE OF STATE

ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

PAUL D GRIFFIS 202 LAID BACK WAY FORT PIERCE, FL 34945

If a ving 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, Florida Statutes.

Registered Agent's Signature

ARTICLE IV - Manager(s) or Managing Memb The name and address of each Manager or Managir	
Title: "MGR" = Manager "MGRM" = Managing Member	Name & Address:
MANAGING MEMBER:	PAUL D GRIFFIS 202 LAID BACK WAY FORT PIERCE, FL 34945
(Use attachment if necessary)	
NOTE: An additional article must be added if a	n effective date is requested
REQUIRED SIGNATURE:	//

Signature of a member or an authorized representative of a member.

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

Fiting Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)