L060000 40718

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





600070879546

04/20/06--01021--011 **160.00



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ROSECTONS CONSTRUCTION LLC (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Bryan N. Rosecrans (Name of Person)		
Bryan N. Rosecrans (Name of Person) Rosecrans Construction LLC (Firm/Company)		
4117 Quail Ranch Ragel (Address)		
New Smyrna, FL 32168 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Properties at (386) 427-0315 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \$\bigcup \\$155.00 Filing Fee & \$\bigcup \\$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 Corporations Clifton Building 2661 Executive Center Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rosecrans Construction (Must end with the words "Limited Liability Company, "Limited	1 Company" or their abbreviation "L.L.C," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4117 Quail Ranch Road New Smyrna, FL 32168	417 Quail Rouch Road New Smyrna, FL 32168
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Byan 1. Rosecco	305
4117 Quai Ranc	ress (P.O. Box NOT acceptable)
New Smy Ma City, State, a	FL 32/68

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

By 97 Leading

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

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Bryon Nelson Rosecrans 417 Qual Rosch Rosel New Sayona of FL 32168
MGRM	Thomas Craig Grainger 417 Quai Ranch Read New Smyrna , Fl 32/68
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
By My Signature of a member of	r an authorized representative of a member.
(In accordance with section	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury
Boyan N. R.	os printed name of signee

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)