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(Reguestor's Name)
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PICK-UP WAIT MAIL
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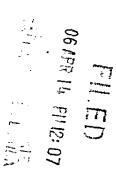
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: OHANA	A Concrete Design, L.	L.C.	
	(Name of Limited	Liability Company)	
The enclosed Articles of	f Organization and fee(s) are su	abmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Colette D. S			
	G	Name of Person)	•
OHANA Co	oncrete Design L.L.C		
	(Firm/Company)	
3826 Ceda	ar Forest Drive Eas	st	
		(Address)	
Jacksonvi	lle Florida, 32210		
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Tammy Fitch		₂₁ (904 \ 710-948	38
,,	of Person)	at (904) 710-948 (Area Code & Daytime 7	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 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 Addre Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	rete Design L.L.C.		
(Must end with the	e words "Limited Liability Compar	y, "Limited Company" or their abbreviation "LLC,"	" or "L.C.,")
ARTICLE II	- Address:		
The mailing a	ddress and street address of	of the principal office of the Limited Li	ability Company is:
Principal Of	fice Address:	Mailing Address:	
3826 Cedar Fore	est Drive East	3826 Cedar Forest Drive East	
Jacksonville Flor	rida	Jacksonville Florida	
32210		32210	-
(The Limited Liab		gistered Office, & Registered Agent's	
(The Limited Liab business entity w	sility Company cannot serve as its of with an active Florida registration.) If the Florida street address		idual or another
(The Limited Liab business entity w	willty Company cannot serve as its of the an active Florida registration.)	own Registered Agent. You must designate an indiv	idual or another
(The Limited Liab business entity w	sility Company cannot serve as its of with an active Florida registration.) If the Florida street address	own Registered Agent. You must designate an indivision of the registered agent are: Name	idual or another
(The Limited Liab business entity w	pility Company cannot serve as its of the American Street address Tammy Fitch 3826 Cedar Forest	own Registered Agent. You must designate an indivision of the registered agent are: Name	idual or another
(The Limited Liab business entity w	pility Company cannot serve as its of the American Street address Tammy Fitch 3826 Cedar Forest	own Registered Agent. You must designate an indivision of the registered agent are: Name Drive East	idual or another O6 APR 4 PH 2: 0
(The Limited Liab business entity w	illity Company cannot serve as its of the an active Florida registration.) If the Florida street address Tammy Fitch 3826 Cedar Forest Florida Jacksonville	own Registered Agent. You must designate an indivision of the registered agent are: Name Drive East street address (P.O. Box NOT acceptable)	idual or another

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing	Member
MGRM	Tammy Fitch
	3826 Cedar Drive East
	Jacksonville Florida 32210
MGRM	Michele LaLonde
	2746 Downing Street
	Jacksonville Florida 32205
MGRM	Colette Snelling
-	4041 Ernest Street
	Jacksonville Florida 32205
MGRM	Lance Agabayani
	3826 Cedar Forest Drive East
(Use attachment if nec	Jacksonville Florida 32210 ssary)
CLE V: Effective date, i	Jacksonville Florida 32210 ssary) other than the date of filing:
ICLE V: Effective date, i effective date, il effective date is listed, the days after the date of REOUIRED SIGNAT	Jacksonville Florida 32210 ssary) other than the date of filing: (OPTIONAL) e date must be specific and cannot be more than five business days prior iling.) URF:
CLE V: Effective date, i effective date, i effective date is listed, the days after the date of REQUIRED SIGNAT	Jacksonville Florida 32210 ssary) other than the date of filing:
CLE V: Effective date, i effective date is listed, the days after the date of REOUIRED SIGNAT Signs (In according to the date of the date)	Jacksonville Florida 32210 ssary) other than the date of filing:
CLE V: Effective date, i effective date is listed, the days after the date of REOUIRED SIGNAT Signs (In according to the date of the date)	Jacksonville Florida 32210 ssary) other than the date of filing:

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)