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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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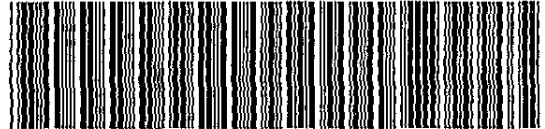
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BROOKS 55 Labor Enterprises, L.L.C.
(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:

Denise Russell

(Name of Person)

Lamont + Auchampau, P.A.

(Firm/Company)

P.O. Box 6026

(Address)

Clearwater, FL 33758

(City/State and Zip Code)

For further information concerning this matter, please call:

Denise Russell

(Name of Person)

at (727) 772-7344

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the limited liability company is: Brooks 55 Labor Enterprises, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

10014 North Dale Mabry, Suite 101
Tampa, FL 33618

Mailing Address:

3040 Gulf To Bay Blvd.
Clearwater, FL 33759

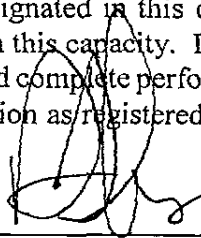
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

David A. Lamont
3040 Gulf to Bay Blvd.
Clearwater, FL 33759

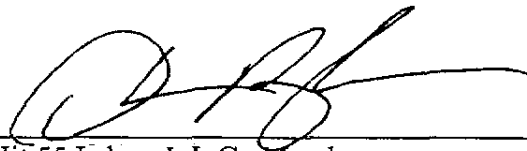
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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relation 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

REQUIRED SIGNATURE:



Hit 55 Labor, L.L.C., Member

By: Derrick Brooks, Manager of Brooks 22, LLC

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)