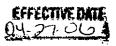
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:	Registration Se Division of Co				
SURIE	cr. TRIGL	JEROS MASONRY	, "LLC"		
50201			d Liability Compa	my)	
The end	closed Articles o	f Organization and fee(s) are so	ubmitted for filing	5.	
Please 1	eturn all corresp	ondence concerning this matte	r to the following	:	
	ELIZAND	RO TRIGUEROS			
		(1	Name of Person)		
•	TRIGUER	OS MASONRY "L	LC"		
		(Firm/Company)		
	666 FAIR	VIEW AVE			
·			(Address)		
	FORT M	YERS FLORIDA	33905		
		(City)	State and Zip Code)	
For fur	her information	concerning this matter, please	call:		
ELIZ	ANDRO T	RIGUEROS	at (239	693-548	33
	(Name	of Person)	(Area Code	e & Daytime To	elephone Number)
Enclos	ed is a check fo	or the following amount:			
\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	7	\$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	Registration of Clifton B 2661 Exe	ourier Addression Section of Corporation uilding cutive Center ee. FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	CI	Æ I	[-]	Na	me	•

The name of the Limited Liability Company is:

DU-27-04

TRIGUEROS MASONRY "LLC"

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

rincipal Offic	e Address:	Mailing Address:	
666 FAIRVIEW	AVE FLORIDA 33905	SAME AS ABOVE	
OKT MITEROI		· · · · · · · · · · · · · · · · · · ·	
The Limited Liabili business entity with		istered Office, & Registered Agent's Sign Registered Agent. You must designate an individual	Tor another
ine name and i	MAYA EXPRESS S		#AY -
		Name	
4152 PALM BEACH BLVD		H BLVD_	
	Florida st	reet address (P.O. Box NOT acceptable)	. မူ
	FORT MYERS	_{FL} 33916	
	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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
"MGR"	ELIZANDRO TRIGUEROS	
	666 FAIRVIEW AVE	
	FORT MYERS FLORIDA 339	305
(Use attachment if necessary)		
CLE V: Effective date, if other than t	he date of filing: 04/27/2006	(OPTIONA)
effective date is listed, the date must		
0 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 that the facts stated herein are true.)

ELIZANDRO TRIGUEROS

Typed or 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)