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SECRETARY OF STATE
TALLAHASSEE FLORIDA



COVER LETTER

TO: Registration Sec Division of Cor		į		
SUBJECT: SE EN	vironmental Geolog	ıy, LLC		
(Name of Limited Liability Company)				
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.		
Please return all correspo	ondence concerning this matte	r to the following:		
Dennis J.	Price, P.G.			
	(1	Name of Person)		
SE Enviro	nmental Geology,	LLC		
	(Firm/Company)		
P. O. Box 45, (16548 Spring St.)				
		(Address)		
White Sp	rings, Florida 320	096		
(City/State and Zip Code)				
For further information of	concerning this matter, please	call:		
Dennis J. Price		at (386) 884-003	39	
(Name	of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check fo	r 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns —	

SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
SE Environmental Geology, LLC	
	Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
16548 Spring St.	P.O. Box 45
White Springs, FL 32096	White Springs, FL 32096
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Dennis J. Price 16548 Spring St	tered Office, & Registered Agent's Signatures Registered Agent. You must designate an individual of another the registered agent are: Name et address (P.O. Box NOT acceptable)
White Springs,	FI. 32096
	tate, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	ad to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all attended to the performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 608, F.S

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Dennis J. Price 16548 Spring St. White Springs, FL 32096 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 7/25/06 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member of 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

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)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)