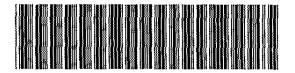
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SEURLTARY OF STAIL

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Al Fonso Barra gan Construction last (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:
Al Fonso Barragan
Al Fonso Bangson Construction ELC
(Firm/Company)
1510 molton 5+ AP+ #1
TALLA Hassee FL 32303 (City/State and Zip Code)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

ρ \$125.00 Filing Fee

ρ \$130.00 Filing Fee &

Certificate of Status

ρ \$155.00 Filing Fee & Certified Copy

(additional copy is enclosed)

ρ \$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

ARTICLE I - Name: The name of the Limited Liability Company is: | ARTICLE I - Name: The name of the Limited Liability Company is: | ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: | Principal Office Address: | Mailing Address: |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

PLFONSO Bayra gan

Name

1510 nilton St APt #1

Florida street address (P.O. Box NOT acceptable)

TALLAHASS CEFL 32303

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.

Restried Agent's Signature (REQUIRED)

(CONTINUED)

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

man va	
Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MCR	OIE BOOK
Tho.	Hirongo Darragan
	#I TALLAHAJZEEF
•	
(Use attachment if necessary)	
LE V: Effective date, if other that	an the date of filing: (OPTIONA
effective date is listed, the date	must be specific and cannot be more than five busine
or 90 days after the date of filin	ng.)
REQUIRED SIGNATURE:	
T	nember or an authorized representative of a member.
-	with section 608.408(3), Florida Statutes, the execution
	and Section 600.406(3), Profitta Statutes, the execution
of this document	t constitutes an affirmation under the penalties of perjury
of this document that the facts st	tated herein are true.)
of this document that the facts st	
of this document that the facts st	tated herein are true.)

\$ 5.00 Certificate of Status (Optional)

of Registered Agent \$ 30.00 Certified Copy (Optional)