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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Simque Construction, LLC**

Certificate of Status	0
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FAX AUDIT # H060002109563

**ARTICLES OF ORGANIZATION  
OF  
Simque Construction, LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: **Simque Construction, LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 122 SW Midtown Place, Suite 101, Lake City, Florida 32024.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: David Simque, 122 SW Midtown Place, Suite 101, Lake City, Florida 32024. Located in the County of Columbia.


**ARTICLE IV DURATION**

The duration for the limited liability company shall be: 12/31/2046.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

David Simque, 122 SW Midtown Place, Suite 101, Lake City, Florida 32024

  
Business Filings Incorporated, Organizer  
Mark Schiff, AVP  
Authorized Representative  
Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,  
Madison, WI 53717  
(608) 827-5300

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FAX AUDIT # H060002109563CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,  
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

The name of the limited liability company is: **Simque Construction, LLC**

The name and address of the registered agent and office is David Simque, 122 SW  
Midtown Place, Suite 101, Lake City, Florida 32024. Located in the County of  
Columbia.

Having been named as registered agent and to accept service of process for the above  
stated 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.

Signature: 

David Simque

Date: 8 / 2 / 06FAX AUDIT # H060002109563FILED  
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