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COVER LETTER

	Registration Section Division of Corporations
SÚBJEC	T: AKW HOLDINGS LCC (Name of Limited Liability Company)
The encl	osed Articles of Organization and fee(s) are submitted for filing.
Please re	turn all correspondence concerning this matter to the following:
. –	TACK C. BULLOCH (Name of Person)
	(Firm/Company)
	PD BOX 1167
_	PD BOX 1167 (Address) TALL ANASSEC FL 32302 (City/State and Zip Code)
For furth	er information concerning this matter, please call:
	MCK C. BULLOCH at (\$30) 528-4205 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed	d is a check for the following amount:
\$\$125.0	0 Filing Fee ρ \$130.00 Filing Fee & ρ \$155.00 Filing Fee & ρ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
AKW HOLDINGS LLC (Must end with the words "Limited Liability Company", "Limited Company" or their abbreviation "LLC," or "LC.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
1546 GRAPE ST PO BOX 1167 TALLANASSEC 76 TALLANASSEC, 76 32303 32302
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:
Name Name PACK C. BULLOCK PACKET OF SECRET
1546 GRAPE 51 SS SS SS SS SS SS SS
TACCAN ASSEC FL 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.
Registered Apont'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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRW - Wanaging Weinber	JACK C. BULLOCH 1546 GRAPE ST TALLANASSEC, 76 32303
· .	
 ,	
(Use attachment if necessary)	
ICLE V: Effective date, if other than a effective date is listed, the date m to or 90 days after the date of filing	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business (.)
REQUIRED SIGNATURE:	1ALS O
Signature of a mer	moer or an authorized representative of a member of 5
of this document co	n section-608.408(3), Florida Statutes, the execution on stitutes an affirmation under the penalties of perjury ed herein are true.)
YCR	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)