1-06000093208

•		
(Re	questor's Name)	
(Ad	dress)	
	•	
(Ad	dress)	
•		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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2006 SEP 21 P 1: 03
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

≥ •			
TO: Registration Sec Division of Corp			
SUBJECT: All Abo	out Concrete, LLC	;	
	(Name of Limite	d Liability Company)	
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please return all correspo	ndence concerning this matte	er to the following:	
Wayne F.	Hales		
wayner.		Name of Person)	
		(Firm/Company)	
279 Laure	enburg Lane		2006 SEC
	<u> </u>	(Address)	SEP 21 MASSE
Ocoee, F	L 34761		SEP 21 F
		/State and Zip Code)	
			P I: 0 F STATE
For further information c	oncerning this matter, please	call:	03 DA
Wayne F. Hales	S	at (407) 656-82	46
(Name o	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	the following amount:		
	\$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)
	Malling Address Registration Section Division of Corporations	Street/Courier Addres Registration Section Division of Corporation	_

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

All About Cond	crete, LLC			
		mpany, "Limited Company" or their abbreviation "LL	.C," or "L.C.,")	
ARTICLE II - A	Addross.			
		ess of the principal office of the Limited	Liability Compa	any is:
Principal Office	Address:	Mailing Address:		
279 Laurenburg I	_ane	Same		
Ocoee, FL 3476	1			
•				
(The Limited Liability business entity with	Company cannot serve as an active Florida registration	ress of the registered agent are:	tividial of the SEP 21 F	
		Name	STATE	
	279 Laurenbu	rg Lane	03 107	
		rida street address (P.O. Box NOT acceptable)		
	Ocoee,	FL 34761		
	•	City, State, and Zip		
		LILY, CHAIL, AUG LIU		

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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:		
MGR	Wayne F. Hales 279 Laurenburg Lane Ocoee, FL 34761		
MGRM	Jaada H. Hales 279 Laurenburg Lane Ocoee, FL 34761	SECRETARY OF STATE TALLAHAS SEE. TLORIDA	
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mus to or 90 days after the date of filing.)			•
REQUIRED SIGNATURE:	en Mh		
Signature of a men	nber or an authorized representative of	a member.	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Wayne F. Hales

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

(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