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SECKELYARY OF STATE

COVER LETTER

TO:	Registration Se Division of Co				
SUBJE	ect: _AL	ex Tractor (Name of Limite)	Services d Liability Company)	LLC.	
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
	AL	EX COLLETT	Name of Person)		
	ALEX TRACTOR SEKUTCE LLC. (Firm/Company)				
	2152 BEW ST. (Address)				
FORT MYTS, F1 33S1C (City/State and Zip Code)					
For further information concerning this matter, please call:					
AL	(Name	c of Person)	at (239) 334 · (Area Code & Daytime Te	-8269 elephone Number)	
Enclos	ed is a check fo	or the following amount:			
\$125	i.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	กร	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
20th) Abey Tractor Service LLC
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,"

ARTICLE II - Address:

Principal Office Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

	•
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered Agent. You must designa business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are: Alex Hallst Name 152 Ben Street Florida street address (P.O. Box NOT accept Tent nyers florida State, and Zip	06 OCT -5 PM 2: 54 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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 Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

REQUIRED SIGNATURE:

Signature of a member or 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 that the facts stated herein are true.)

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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)