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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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COVER LETTER

TO: Registration Se Division of Co				,	
STIRIECT: Buckey	/e Concrete, LLC				
50505021	(Name of Limite	d Liability Compa	ıy)		
The enclosed Articles o	f Organization and fee(s) are s	abmitted for filing	•		
Please return all corresp	condence concerning this matte	er to the following:			
Peggy M. I			·		- ,
	((Name of Person)			2
Kohnen &	Patton LLP				塑艺
	•	(Firm/Company)			
201 E. Fift	th Street, Suite 800)			07 Jay 12
	· · · · · · · · · · · · · · · · · · ·	(Address)			- : S.
Cincinnati	, Ohio 45202				SA.
		/State and Zip Code)			7
For further information	concerning this matter, please	call:			
Peggy M. Barker		at (513	381-065	6	
(Name	of Person)	(Area Code	& Daytime To	elephone Number)	•
Enclosed is a check for	or the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Fill Certified Copy (additional copy is	-	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	f Corporation	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	5 :
Buckeye Concrete, LLC (Must end with the words "Limited Liability Company, "Limited Liability Company," Limited Liability Company, "Limited Liability Company, "Limited Liability Company, "Liability Company, "Liability Company, "Liability Company, "Liabil	ited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14000 B 68th Street North Largo, Florida 33771	14000 B 88th Street North Largo, Florida 33771
Large, Forder Corre	The state of the s
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Region business entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an individual or another
CT Corporation System	
Name	€
1200 South Pine Island Re	oad
Florida street ac	idress (P.O. Box NOT acceptable)
Plantation, Florida 33324	<u>FL</u>
City, State,	and Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all verformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

o the proper and complete performance of my duties, and I am familia actions of my position as registered agent as provided for in Chapter 6

Registered Agent's Signature (REQUIRED)

LOCISTANI SECTOMAN

LOCIS

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Bradley Hardig 8350 Tarton Fields Lane	
	Mason, Ohio 45040	
MGR	Glenn Bowles	
	12907 Hickorywood Lane	
	Largo, FL 33774	
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EV: Effective date	if other than the date of filing: (OPTIONAL	rγ
ective date is listed.	he date must be specific and cannot be more than five business days	enriar
days after the date o	filing.)	, br ror
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Filing Fees:

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

Peggy M. Barker

- \$ 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 that the facts stated herein are true.)

Typed or printed name of signee