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COVER LETTER

TO: Registration Secti Division of Corpo			
SURJECT. S&OG	BREEN WORKS,	LLC	
		d Liability Company)	
The enclosed Articles of O	Organization and fee(s) are so	ubmitted for filing.	
Please return all correspon	dence concerning this matte	er to the following:	
CHARLES	D BLALOCK		
	`	Name of Person)	
CHARLES	D BLALOCK	Firm/Company)	
1007 EAIE	2. RWINDS CR	,	
1007 FAIR	CVIINDS CR #2	(Address)	
PLANT CI	TY, FLORIDA	33563	
,		/State and Zip Code)	
For further information con	ncerning this matter, please	call:	
CHARLES D BL	AL OCK	813 \ \ \ 361-60	60
(Name of	Person)	at (813) 361-60 (Area Code & Daytime T	elephone Number)
Enclosed is a check for t	the following amount:		
▼ \$125.00 Filing Fee	\$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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons · Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BRANDON,

\$3ØGREEN WORKS, LLC	
(Must end with the words "Limited Liability Company, "Limit	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
538 OAKS CREEK DR BRANDON, FL 33511	P.O. BOX 809 EAST BLOOMINGDALE AVE SAME 228 BRANDON, FL 33511-8713
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	l Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
STEVE G EDWARDS	ASS: ASS: ASS: ASS: ASS: ASS: ASS: ASS:
Name	
538 OAKS CREEK DR	dress (P.O. Box NOT acceptable)
Florida street add	dress (P.O. Box NOT acceptable)

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..

FL 33511

Registered Agent's Signature (REQUIRED)

City, State, and Zip

(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:

<u>Title:</u> "MGR" = Mana	iger	Name and Address:	
"MGRM" = Ma	naging Member		
MGR MBR		STEVE G EDWARDS	
		538 OAKS CREEK DR	
		BRANDON, FL 33511-8713	
	 		
			
(Use attachmen	e date, if other than the	te date of filing: ((OPTIONAL)
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