

207000032467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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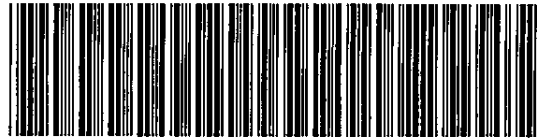
(Business Entity Name)

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TALLAHASSEE FLORIDA

DB

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: JEFF WORLEY DRYWALL L L C

The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

JEFF WORLEY Jeff Worley
Name of Person

JEFF WORLEY DRYWALL L L C _____
Firm/Company

767 Pinecrest Lane _____
Address

Ft Walton Beach, Florida 32548 _____
City, State, and Zip Code

For further information concerning this matter, please call:

Jeff Worley Jeff Worley at (850) 862-3081 _____
Name of Person Area Code and Daytime Telephone Number

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**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I Name:
The name of the Limited Liability Company is:

JEFF WORLEY DRYWALL L L C

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

Principal Office Address:

767 Pinecrest Lane
Ft Walton Beach. Fl 32547

Mailing Address:

ARTICLE III Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name

JEFF WORLEY

Florida street address (P O Box NOT acceptable)

767 Pinecrest Lane

City, State, and Zip

Ft Walton Beach Fl 32547

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

CONTINUED

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ARTICLES OF ORGANIZATION PG 2

ARTICLE IV Managers of Managing Members

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

TITLE
MANAGER

JEFF WORLEY
767 Pinecrest Lane
Ft Walton Beach, FL 32547

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Note: An additional article must be added if an effective date is requested

Article V The effective date shall be upon filing with the Secretary of State

REQUIRED SIGNATURE:

Jeff Worley

Signature of a member or an authorized representative of a member.

(In accordance with Sec 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.)

JEFF WORLEY
Typed or printed name of signee