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(Requ	estor's Name)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fili	na Officar	
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Office Use Only



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08/08/07--01008--010 **125.00

Effective Date 08/06/2007

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: A +T Rubber Mulch Sales LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tonya L-Mahterian (Name of Person)
A+T Rubber Mulch Sales LLC (Firm/Company)
3838 Hyde Park Dr. JAddress)
Fort Myers F2-33905 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Tonya Mahterian at (239) 464-8554 (Name of Person) (Area Code & Daytime Telephone Number)
en e et e e e e esta ut a auto
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & \$\times \text{\$155.00 Filing Fee & \$\times \text{\$160.00 Filing Fee, } \\ \text{Certificate of Status & Certified Copy & Certified Copy } \\ \text{(additional copy is enclosed)} \text{Certified Copy } \\ \text{(additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Effective Date 08/06/2007

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
A+T RUBBER D (Must end with the words "Limited Liability	NULLH SALES LLC TY Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3838 Hyde Parker. FORT MYERS FL 33905	3838 Hyde Park Dr. Fort myers, A. 33900
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re-	egistered agent are:
Tonya L. M Name	le Park Dr.
3838 Hyo	ress (P.O. Box NOT acceptable)
FORT Myers City, State, a	3 3 9 0 5 nd Zip
Having been named as registered agent and to a	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

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 Men	Name and Address:
MGR	Tonya L Mahterian 3838 Hyde Park Dr. FORT Thyers, FL-33905
MARM	Alan G Mahterian 3838 Hyde Park Dr. FORT Phyers, FL3390
marm	Alexander Mahterian 3838 Hyde Park Dr FORT Myers, Fe 33905
MERM	MARLO Manterian 3838 Hyde Park Dr FIRET Physics, R. 33905
(Use attachment if necessary	y)
FICLE V: Effective date, if other	er than the date of filing: $8/6/07$. (OPTIONAL) te must be specific and cannot be more than five business days pr

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

Tonya L. Mahterian
Typed or printed name of signee

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)

DIVISION OF COMPLICATION

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