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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

77 PM 4:

COVER LETTER

TO: Registration S Division of Co	
	Campbell Fabrication 11C
SUBJECT:	Campbell Fabrication LLC (Name of Limited Liability Company)
The enclosed Articles o	f Organization and fee(s) are submitted for filing.
Please return all corresp	ondence concerning this matter to the following:
	Charles H. Campbell (Name of Person)
	(Name of Person)
	Campbell Fabrication LLC
	(Firm/Company)
	Trenton FL 32693
	(Address)
•	Trenton FL 32693
**************************************	(City/State and Zip Code)
For further information	concerning this matter, please call:
Charles H.	Compbell at 352 281-2388 (Area Code & Daytime Telephone Number)
(Name	of Person) (Area Code & Daytime Telephone Number)
	or the following amount:
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate of Status & Certificate o
	Mailing Address Street/Courier Address Registration Section Registration Section Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:
The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
4860 NE 18+1 Trail 4860 NE 18+1 Trail
4860 NE 18th Trail Trenton, FL 32693 Trenton, FL 32693
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Charles H. Campbell
Name

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..

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED

4860 NE 1813 Trail

(CONTINUED) Page 1 of 2 2007 DEC -4 PM 4: 34

Filing Fees:

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

Signature of a member or an authorize

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2

(In accordance with section 608.40%(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Charles H. Campbell
Typed or printed name of signee

SECRETARY OF STATE

representative of a member.