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Division of Corporations

Fax Number : (850) 617-6383

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Account Name : CSH SERVICES, LLC

Account Number : I20070000160 Phone : (800)494-3124

Fax Number : (561) 455-9885

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ELORIDA/FOREIGN LIMITED LIABILE CO.

O'Connor Contracting, LLC

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY > COMPANY

In compliance with Chapter 608,F.S.

### ARTICLE I NAME

The name of the Limited Liability Company is:

OCONNOR CONTRACTING, LLC

#### ARTICLE II ADDRESS

The street address of the principal office of the Limited Liability Co

1279 SORRELLS CT

JACKSONVILLE FL 32221

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

MARION WEHNER

515 COLLEGE DR.

MIDDLEBURG FL 32068-6521 ...

Having been named as registered agent 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..

MARION WEHNER / REGISTERED AGENT'S SIGNATURE

#### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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OCONNOR CONTRACTING, LLC

。1916年,東京市

#### MEMBERS (optional) ARTICLE V

MANAGING MEMBER: THOMAS B. CONNOR. 1279 SORRELLS CT JACKSONVILLE FL 32221

MANAGING MEMBER: JUDITH C. OCONNOR 1279 SORRELLS CT JACKSONVILLE FL 32221

MANAGING MEMBER: THOMAS V. OCONNOR 1276 SUMMIT OAKS DR W JACKSONVILLE FL 32221

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 populaties of perjury that the facts stated herein are true.

THOMAS B. OCONNOR

Typed or printed name of signee