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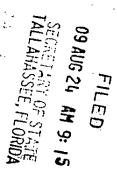
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B. KOHR

AUG 26 2009

EXAMINER



COVER LETTER

то:	Registration Division of C	Section Corporations		
SUBJI	ECT:	DORSEY &	SONS MASONRY LL	C
5050		Name of Limi	ted Liability Company	``
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	40 of 08
Please	return all corre	spondence concerning this mat	tter to the following:	LE SE
		ALI	EX N. DORSEY	624 A
			Name of Person	F. 9.
		DORSEY &	SONS MASONRY LLC Firm/Company	OR TO
		1809 E. C	CERVANTES STREEFFEC	TIVE DATE 9 1100
			Address	• • •
			ACOLA, FL 32501	
		Cr	ty/State and Zip Code	
		E-mail address: (to be used	for future annual report notification)	
For fur	ther information	n concerning this matter, pleas	e call:	
		N. DORSEY e of Person	at (850) 49 Area Code & Daytime Teleph	6-8559 none Number
Enclos	sed is a check :	for the following amount:		
\$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	\$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 Corporations Clifton Building 2661 Executive Center Cir	role

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
DORSEY & SONS MASONRY LLC (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:
1809 E. CERVANTES ST 1809 E. CERVANTES ST PENSACOLA, FL 32501 PENSACOLA, FL 32501
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:
ALEX N. DORSEY
Name Rame
1809 E. CERVANTES STREET
Florida street address (P.O. Box NOT acceptable)
PENSACOLA, 32501 EL SE
City, State, and Zip
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.St.

(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:

"MGR" = Manager "MGRM" = Managing Member "MGR" 50% ALEX N. DORSEY 1809 E. CERVANTES STREET PENSACOLA, FI 32501 "MGRM" 50% DYLAN D. DORSEY 5059 LONG CREEK ROAD HOLT, FL 32564 "In accordance with section 608.408(3), Florida Standes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) ALEX N. DORSEY Typed or printed name of signee	<u>Title:</u>	Name and Address:
"MGR" 50% ALEX N. DORSEY 1809 E. CERVANTES STREET PENSACOLA, FL 32501 "MGRM" 50% DYLAN D. DORSEY 5059 LONG CREEK ROAD HOLT, FL 32564 "ILLE V: Effective date, if other than the date of filing: SEPT. 1, 2009 (OPTIONAL) n effective date is listed, the date must be specific and cannot be more than five business days programment 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.) ALEX N. DORSEY Typed or printed name of signee	—	
"MGRM" 50% DYLAN D. DORSEY 5059 LONG CREEK ROAD HOLT, FL 32564 (Use attachment if necessary) TICLE V: Effective date, if other than the date of filing: SEPT. 1, 2009 (OPTIONAL) n effective date is listed, the date must be specific and cannot be more than five business days p 90 days after the date of filing.) REQUIRED SIGNATURE: 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.) ALEX N. DORSEY Typed or printed name of signee	"MGRM" = Managing Me	ember
PENSACOLA, FL 32501 DYLAN D. DORSEY 5059 LONG CREEK ROAD HOLT, FL 32564 (Use attachment if necessary) TICLE V: Effective date, if other than the date of filing: SEPT. 1, 2009 (OPTIONAL) in effective date is listed, the date must be specific and cannot be more than five business days properly and the date of filing.) REQUIRED SIGNATURE: (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.) ALEX N. DORSEY Typed or printed name of signee	<u>"MGR"</u> 50%	ALEX N. DORSEY
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)