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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	, , , , , , , , , , , , , , , , , , ,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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S. HAWKES 0CT - 8 2009 EXAMINER

COVER LETTER

TO:	Registration Division of	n Section Corporations					
SUBJ	ECT:	American Steel Lin	ie Bui	ilding :	Supply o	f Flori	da, LLC
		Name of Limi					
The en	closed Articles	s of Organization and fee(s) are	submit	ted for fil	ing.		
Please	return all corre	espondence concerning this ma	tter to th	e followi	ing:		
				Thomas	3		
			Name o	of Person			
		Thomas Ta	x & Fir	nancial	Service In	ıC.	
			Firm/C	Company			
		1300	6 Old I	River R	load		
			Ad	dress	·		
	Petal, MS 39465						
		Ci	ty/State a	and Zip Co	ode		
		E-mail address: (to be used	nomas	@yaho	oo.com	\m\	
For fur	ther informatio	on concerning this matter, pleas		c amigar i	sport normean	,,,,	
		er P. Kelly Jr.	at (850) ode & Daytime		7653
	Maii	ic of reison		Area Co	ide & Daytime	retepnor	e Number
Enclos	ed is a check	for the following amount:					
]\$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce	rtified C	ing Fee & Copy opy is enclosed	— Co	60.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registra Divisio Clifton 2661 E	Courier Addi ation Section on of Corporat Building xecutive Cent issee, FL 3230	ions ter Circle	•

MPANY PHONE ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **ARTICLE I - Name:** The name of the Limited Liability Company is: American Steel Line Building Supply of Florida, 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: 801 Playground Road 801 Playground Road Ft. Walton Beach, FL 32547 Ft. Walton Beach, FL 32547 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: Walter P. Kelly Jr. Name 801 Playground Road Florida street address (P.O. Box NOT acceptable) Ft. Walton Beach 32547 FL 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

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Registered Agent's Signature (REQL

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..

(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	Waiter P. Kelly Jr.
1GRM	Waiter P. Kelly Jr
	801 Playground Road
	Ft. Walton Beach, FL 32547
	<u></u>
-	
•	
Jse attachment if necessary)	
•,	
EV: Effective date, if other than the	e date of filing: (OPTIONAL)
ctive date is listed, the date must b	be specific and cannot be more than five business days pri
ays after the date of filing.)	
EQUIRED SIGNATURE:	
~ / <i>DH</i>	
Signature of a mount	er or an authorized representative of a member.
Signature of a mean	er of an authorized representative of a member.
(In accordance with se	ection 608.408(3), Florida Statutes, the execution
that the facts stated he	stitutes an affirmation under the penalties of perjury
	Activation and the state of the
that the facts stated he	Moltor D. Kolly, Ir
	Walter P. Kelly Jr.

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)