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SECRETARY OF STATE TAIL AHASSEE, FLORIDA

M. THOMAS

OCT. 2 9 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BROWN OUT TRUCKING (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:	
Henry Brown (Name of Person)	
(Name of Person)	
BROWN OUT TRUCKING	
(Firm/Company)	
356 MCRAY BLUD	
(Address) ZS	
SANFORD ShA 3277/ER CT (City/State and Zip Code)	1 *
	7
For further information concerning this matter, please call:	j
96mm Brown 314-5380 0 407.3	22-9
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
S125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \ \text{Certified Copy} \ \ Certificate of Status & Certificate of Sta	

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

(additional copy is enclosed)

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy (additional copy is enclosed)

· ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BROWN OUT TRUCKING LLC

(Must end with the words "Limited Liability Company, "Limited Company" of their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
356 MCKAY BLUD	3 6 MCKAY BLUD
SANFORD TLA	SANFORD 3LA
3277/	3277/

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:

fortua stroot address of the registered agent are.	
Darlene Brown	ZESE TALL
Name	CAR CO
356 MCKAY BLUD	ZAR TAR ASS
Florida street address (P.O. Box NOT acceptable)	EF.O. P
SANFORD FL 32771	FLO ST
City, State, and Zip	器 7

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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 Member	Name and Address:
MGRM	DARLENO BROWN 336 MCKAY BLUD SANFORD 3LA 32771
MGR	Henry BROWN 356 MCRAY KLUD SANFORD 3LA 32771
	T SECRET
(Use attachment if necessary)	E SSER
ARTICLE V: Effective date, if other than the colling an effective date is listed, the date must prior to or 90 days after the date of filing.)	thate of filing: 10-24-09 (OPTIONAL) be specific and cannot be more than five business days

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.)

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)