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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	PERDUE CUSTOM BUILDERS LLC						
	Name of Limited Liability Company						
The en	closed Articles of Organization and fee(s) are submitted for filing.						
Please	return all correspondence concerning this matter to the following:						
	BRANDON ALAN PERDUE	SEC	200 d				
	Name of Person	AH SHE	FC.				
	PERDUE CUSTOM BUILDERS LLC	A.SSE	onna nfc 23 PM 12: 5				
	Firm/Company	E O	PK				
205 PERDUE ROAD			<u>.∵</u> ₩				
	Address	D F					
DEFUNIAK SPRINGS, FL 32433							
	City/State and Zip Code						
-	E-mail address: (to be used for future annual report notification)						
For fur	ther information concerning this matter, please call:						
	BRANDON A PERDUE at (850) 974-7879 Name of Person Area Code & Daytime Telephone Number						
Enclos	ed is a check for the following amount:						
7]\$125.	00 Filing Fee \$\ S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Codditional copy is enclosed)	of Status Copy					
	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 Circle Tallahassee, FL 32301						

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Lin	e: nited Liability Company is:						
	PERDUE CUSTOM B end with the words "Limited Liability		<u> </u>				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liab Tity Company is Principal Office Address: Mailing Address: Mailing Address:							
Principal Office Ad	dress:	Mailing Address:	TARY TARY IASSI	F			
205 PERDUE ROA DEFUNIAK SPRIN		205 PERDUE ROAD DEFUNIAK SPRINGS	FL 32433A				
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 Fl	orida street address of the re	gistered agent are:					
BRANDON ALAN PERDUE							
-	Name						
205 PERDUE ROAD							
Florida street address (P.O. Box NOT acceptable)							
_	DEFUNIAK SPRINGS	FL 32433					
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.S..

Registered Agent's Signature (REQUIRED)

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	BRANDON ALAN PERDUE 205 PERDUE ROAD DEFUNIAK SPRINGS, FL 32433
MGRM	JAMES A PERDUE 205 PERDUE ROAD DEFUNIAK SPRINGS, FL 32433 E.G. FLORE DEFUNIAK SPRINGS, FL 32433 E.G. DEFUNIAK SPRINGS FL 32433 E.G. DEFUNIAK
(Use attachment if necessary) ARTICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
o or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sec	r or an authorized representative of a member.
	ANDON ALAN PERDUE
Filing Fees:	ped or printed name of signce

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)