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(((H100001393713)))



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From:

Account Name : FLORIDA & OFFSHORE BUSINESS FORMATION

Account Number: I20010000099
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FLORIDA LIMITED LIABILITY CO.

PIERCE-ARCHER LTD. MASTER FRAMING LLC

Certificate of Status	0
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Page Count	781 APIT
Estimated Charge	\$125.00

D. BRUCE

Pierce-Archer LCC

JUN 17 2010

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June 15, 2010

FLORIDA DEPARTMENT OF STATE

FLORIDA & OFFSHORE BUSINESS FORMATION, INC.

SUBJECT: PIERCE-ARCHER LTD. MASTER FRAMING LLC

REF: W10000028427

10 JUN 16 MM 9: 38 SECRETARY OF STATE TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity cannot include "LTD.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist JI FAX Aud. #: E10000139371 Letter Number: 110A00014764



June 16, 2010

FLORIDA DEPARTMENT OF STATE

FLORIDA & OFFSHORE BUSINESS FORMATION, INC.

SUBJECT: PIERCE-ARCHER LTD. MASTER FRAMING LLC

REF: W10000028427

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please refax the first page of the articles, I-V.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

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10 JUN 16 AM 6: 29
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Flonda 32314

ARTICLES OF ORGANIZATION OF PIERCE-ARCHER LLC A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE (

<u>Name</u>

The name of the Limited Liability Company is: Pierce-Archer LLC

ARTICLE II

Address

The mailing address and street address of the principal office of the Limited Liability Company Is; 20 S. Broad Street, Brooksville, FL. 34601.

ARTICLE III

Registered Agent

The name of the initial resident agent and the initial address of the registered office where process may be served in the State of Florida is: Florida Business Formation, Inc., 20 S. Broad Street, Brooksville, FL 34601.

ARTICLE IV

Management

The Limited Liability Company is to be managed by a manager or managers and the names and addresses of the managers are: John Archer of 20 S. Broad Street, Brooksville, FL 34601.

ARTICLE V

Admission of Additional Members

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be: limited as more particularly described in the Operating Agreement of the Company

ARTICLE VI

Members Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: limited as more particularly described in the Operating Agreement of the Company

In accordance with section 608.408(3), Florida Statues, the execution of the document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signature of authorized representative or a member

Sandra L. Miller

Dated: 06/15/2010

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608,415 OR 608.507, FLORIDA STATUES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited company is: Pierce-Archer LLC
- 2. The name and address of the registered agent and office is:

Florida Business Formation, Inc. 20 S. Broad Street Brooksville, FL 34601

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.

John Dunbar

For and on behalf of:

Florida Business Formation, Inc.

Dated: 06/15/2010

10 JUN 16 AM 9: 38