L10000109844

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name) .
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Codified Conice Codification of Obtain
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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TO IS LO

SECRETARY OF STATE DIVISION OF CORPORATION

N. Culligan OCT 21 200

COVER LETTER

TO:

Registration Section

Division of	Corporations	
_{SUBJECT:} Her	ry C. Black Concr	ete Pumping
	Name of Limi	ted Liability Company
The malessa Mills	our of Organization and fee(s) are	submitted for filing.
Please return all corr	respondence concerning this mat	ter to the following:
Henry I	Black	
		Name of Person
Henry (C. Black Concrete	Pumping
		Firm/Company
3475 Li	onel Rd.	
		Address
Mims Fl.	32754	
		ty/State and Zip Code
hblack20	@cfl.rr.com	for future annual report notification)
For further informati	on concerning this matter, pleas	
Henry Black		at (407) 908-6271
Na	me of Person	Area Code & Daytime Telephone Number
Enclosed is a check	for the following amount:	4
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) Graph Copy Certified Copy 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 Encentive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		e Pumping LLC .imited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ac		minot statemy company, subject, or vision y	
		s of the principal office of the Limited Liabilit	ty Company is:
Principal Office A	<u> Address:</u>	Maining Address:	
3475 lionel rd		3475 lionel rd.	
		mins II 32754	
nims fl. 32754		1111115 11 32/34	
mins ii. 32754		1111(11S 11 32734	
ARTICLE III - R The Limited Liability C business entity with an	ompany cannot serve as active Florida registratio	Registered Office, & Registered Agent's Sign to own Registered Agent. You must designate an individual on the control of the c	or another OCT
ARTICLE III - R The Limited Liability C business entity with an	ompany cannot serve as active Florida registratio	Registered Office, & Registered Agent's Sign to own Registered Agent. You must designate an individual o	r another ST
ARTICLE III - R The Limited Liability C business entity with an	ompany cannot serve as active Florida registratio	Registered Office, & Registered Agent's Sign to own Registered Agent. You must designate an individual on the control of the registered agent are:	SION OF CO
ARTICLE III - R The Limited Liability C business entity with an	ompany cannot serve as active Florida registration Florida street address Henry Black	Registered Office, & Registered Agent's Sign to own Registered Agent. You must designate an individual on so of the registered agent are:	SION OF CO
ARTICLE III - R The Limited Liability C business entity with an	ompany cannot serve as active Florida registratio	Registered Office, & Registered Agent's Sign to own Registered Agent. You must designate an individual on so of the registered agent are:	or another OCT
ARTICLE III - R The Limited Liability C business entity with an	rompany cannot serve as active Florida registration Florida street address Henry Black 3475 lionel	Registered Office, & Registered Agent's Sign to own Registered Agent. You must designate an individual on so of the registered agent are:	SION OF CO
ARTICLE III - R The Limited Liability C business entity with an	ompany cannot serve as active Florida registration Florida street address Henry Black 3475 lionel	Registered Office, & Registered Agent's Sign to own Registered Agent. You must designate an individual on the second state of the registered agent are: Name	SION OF CO

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 familian 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:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
MGR	Henry C. Black		
	3475 lionel rd		
	mims fl. 32754		
(I lee attaches and if a conseque)			
(Use attachment if necessary)			
effective date is listed, the date must 0 days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business d		rio OIVISION OI
· · · · · · · · · · /.	her of an authorized representative of a member.		Ç
(In accordance with section of	00 400(2) Fig.: 4 45 4 45 4 45 4 45 4 45 4	7	
I am aware that any false info	28.408(3), Florida Statutes, the execution of this document ler the penalties of perjury that the facts stated herein are true, ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)	5	Ç.
l am aware that any false info	ler the penalties of perjury that the facts stated herein are true. ormation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)	AM ED: 19	

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)