

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H10000269986 3)))



H100002699863ABC8

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : AGENTS AND CORPORATIONS, INC  
Account Number : I20010000112  
Phone : (302) 575-0875  
Fax Number : (302) 575-0925

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
Black Lightning Asphalt LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

RECEIVED  
10 DEC 16 PM 12:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
10 DEC 16 AM 8:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

DEC 17 2010

EXAMINER

12/16/2010 10:40 AM

H10000269986 3

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is: **Black Lightning Asphalt LLC**

**ARTICLE II – Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: **118 S. Halifax Ave., Ste 304, Daytona Beach, FL 32118.**

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

**Agents and Corporations, Inc.  
300 Fifth Avenue South  
Suite 101-330  
Naples, FL 34102**

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.

**Agents and Corporations, Inc.**

  
By: **John L. Williams, Vice President**


**ARTICLE IV – Management (Check box if applicable.) [ ]**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.

**ARTICLE V – Manager:**

The Initial Manager(s) of the Limited Liability Company shall be:

**Matthew K. Vedder**

  
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.)

**Matthew K. Vedder**  
Typed or printed name of signer

**FILED**  
10 DEC 16 AM 8:55  
CLERK OF STATE  
TALLAHASSEE, FLORIDA