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2011 MAY -6 PM 3: 08
SECRETARY OF STATE
TALL AHASSEE FLORIDA

T. CLINE
MAY - 9 2011
EXAMINER

## COVER LETTER ..

**Registration Section** 

TO:

Division of C	Corporations			
SUBJECT: Dow	ntown Concrete Re	ecycling LLC		
SCHOLET.	Name of Limite	d Liability Company	<del></del>	
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.		
Please return all corre	spondence concerning this matte	er to the following:		
Gina Eri	ona			
<u>Gina Fri</u>		Name of Person		
			•	
Downto	wn Concrete Recy			
		Firm/Company		
310 Tore	chwood Avenue			
		Address		
Plantation	ı, FL 33324			
- idirection	<del></del>	/State and Zip Code		
gmfriona@	bellsouth.net		2011 SEI	
	E-mail address: (to be used for	or future annual report notification)	RET/ AHA	**
For further informatio	n concerning this matter, please	call:	2011 MAY -6 SECRETARY FALLAHASSEI	
Gina Friona		054 969 1704	Y OF	
	e of Person	at (954) 868-1794 Area Code & Daytime Telephone Nur	PM 3: 08 OF STATE F, FLORID	C
		, , , , , , , , , , , , , , , , , , ,	REP.	
Enclosed is a check	for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certifie	0 Filing Fee, cate of Status & ed Copy	
			nal copy is enclosed)	
	Mailing Address	Street/Courier Address		
	Registration Section Division of Corporations	Registration Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

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

A	RT	TCI	Æ.I	- N	ame:
$\overline{}$		11.	2 II 2 I	- 13	

The name of the Limited Liability Company is:

### Downtown Concrete Recycling LLC

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

#### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:		
310 Torchwood Avenue Plantation, FL 33324	310 Torchwood Avenue Plantation, FL 33324		
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address	own Registered Agent. You must designate an indi	vidual or another.	
Gina Friona		-6 SERY	
	Name	E.F	M
310 Torchwo	ood Avenue	7-6 PM 3: 00 TARY OF STATE ASSEE, FLORIDA	C
Florida	street address (P.O. Box NOT acceptable)		
Plantation	<sub>FL</sub> 33324	7	
	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)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Gina Friona		
7701171	310 Torchwood Avenue		
	Plantation, FL 33324		
		<del></del>	
	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)  RTICLE V: Effective date, if other than the	he date of filing: May 3, 2011	ŠLIOŽ Š	
RTICLE V: Effective date, if other than the	he date of filing: May 3, 2011		ys prior
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