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Certified Copies	·	
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Special Instructions to I	Filing Officer:	
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B. BOSTICK
AUG 8 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHERWIN'S CONSTRUCTION COMPANY, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MATTHEW S. CANNAD	Υ	
	Name of Person	
SHERWIN'S CONSTRUC	TION COMPANY, LLC	•
	Firm/Company	
2280 TREASURE POINT I	RD	
	Address	No.
GREEN COVE SPRINGS, FI		LLA I
	ty/State and Zip Code	tass 6-5
ERIK@WEHNERFINANCIAL.C	OM for future annual report notification)	(L) =
For further information concerning this matter, pleas ERIK J WEHNER EA	•	PH 4: 10
Name of Person	Area Code & Daytime Telephone	Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\sum \text{Status}\$ Certificate of Status	Certified Copy Certified Copy (additional copy is enclosed) Certified Copy	60.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
Mailing Address Registration Section	Street/Courier Address Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 Limited Liability Company is:

SHERWIN'S CONSTRUCTION COMPANY, 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:
2280 TREASURE POINT RD GREEN COVE SPRINGS, FL 32043	SAME
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the re	,—: —
ERIK J WEHNER EA	egistered agent are:
Name	Ç: I ™
515 COLLEGE D	R
Florida street add	ress (P.O. Box NOT acceptable)
MIDDLEBURG	ress (P.O. Box NOT acceptable)
. City, Sta	ite, 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:

MGRM	MATTHEW S CANNADY	
	2280 TREASURE POINT RD	
	GREEN COVE SPRINGS, FL 32043	
		
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	COS COS	
· · · · · · · · · · · · · · · · · · ·		
Use attachment if necessary)		
.F. V: Effective date if other than	the date of filing: (OPTION	
	st be specific and cannot be more than five business d	
days after the date of filing.)		

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

MATTHEW SHERWIN CANNADY

Typed or printed name of signee

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)