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CURETARY OF STA LLAHASSEE, FLOR

COVER LETTER

Division of Corporations		
SUBJECT: Gulf Gost Masonry and Concrete "116" 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:		
James Derck Boyington		
Firm/Company		
113 Temple lerrace		
Address Fl. 32348		
E-mail address: (to be used for future agricular report notification)		
For further information concerning this matter, please call:		
James Boy noton at (850) 223-1072 Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$ Certificate of Status \$\text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is enclosed)		
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gulf Cast Masony and Concrete "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:
13 Temple Terrace	
Percy F1 32348	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	
The name and the Florida street address of the r	ek Boyington
113 Tema	ole Terrace dress (P.O. Box NOT acceptable)
Perr	52348

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

TALLAHASSEE FLOOR

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	James Derek Boyington
	113 Temple Jerrace Perry 71. 32348
MGRM	James Walker
	P.O Box 653 Perry F1. 32348
	·
(Use attachment if necessary)	
	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature #Va m	member or an authorized representative of a member.
(In accordance with section	on 608.408(3), Florida Statutes, the execution of this document
I am aware that any false	under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)

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)