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SECRETARY OF TALL
TALL AHASSEF FLORIDS

B. BOSTICK

OCT 11 2013

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

Quad States Construction of Florida, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following: George R. Harrison, Jr. Name of Person Quad States Construction of Florida, LLC Firm/Company 14021 N Dale Mabry Highway, Suite B Address Tampa, FL 33618 City/State and Zip Code bharrison@quadstatesllc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: George R. Harrison, Jr. Area Code & Daytime Telephone Number Enclosed is a check for the following amount: □ \$160.00 Filing Fee, □ □\$125.00 Filing Fee ■\$130.00 Filing Fee & □\$155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Ccrtified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314

Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	any is:
Quad States Construction of Florida, LLC	
	ed Liability Company, "L.L.C.," or "LLC.")
ADVICTE II. Address	
ARTICLE II - Address:	the principal office of the Limited Lightlity Company is:
The maining address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14021 N Dale Mabry Highway, Suite B	14021 N Dale Mabry Highway, Suite B
Tampa, FL 33618	Tampa, FL 33618
	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its ow	m Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	m Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address o	n Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address o	n Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of George R. Harrison, Jr. 14021 N Dale Mabry Highway (The Company Compa	n Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of George R. Harrison, Jr. 14021 N Dale Mabry Highway (The Company Compa	n Registered Agent. You must designate an individual or another of the registered agent are: Name Way, Suite B

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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Dale Lancaster
	14021 N. Dale Mabry Highway, Suite b
	Tampa, FL 33618
	
	- Market Park
effective date is listed, the date mus	e date of filing: (OPTIONAL) It be specific and cannot be more than five business of
CLE V: Effective date, if other than the	e date of filing: (OPTIONAL) It be specific and cannot be more than five business of
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CLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a manual am aware that any false information under the state of the state	and Authorized Renessants, er or an authorized representative of a member.
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