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hu r		COVE	CR LETTER .		
TO:	Registration Division of C		Ý		
SURJE	A &	P Metal Work	s LLC		
		Name of Limi	ted Liability Company		
The end	closed Articles o	of Organization and fee(s) are	submitted for filing.		
Please r	return all corres	pondence concerning this mat	ter to the following:		
	Wilburr	n Leon Alvey j	r		
-			Name of Person		-
	A&PN	Metal Works		12 (4)	2013 NOV
_			Firm/Company	1 4"	NO.
	8349 S	ierra St		1883 1883 1884	8
-			Address	7.94	P
	Navarre	e, FL 32566		2 GE S.	1: 23
-			ty/State and Zip Code		ယ်
-	alveychip	@bellsouth.net			
		E-mail address: (to be used	for future annual report notification)		
For furth	her information	concerning this matter, please	e call:		
Chi	p Alvey	<i>!</i>	at (850 7488121		
	Name	of Person	Area Code & Daytime Telephone Number	_	
Enclose	ed is a check f	or the following amount:			
⊒ \$1 2 5.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ \$160.00 Filing Certified Copy Certificate of Certified Copy	Status &	

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the	e Limited Liability Company is	s:
A & P Metal Work	s LLC	
	(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II -	Address:	
The mailing add	dress and street address of the	principal office of the Limited Liability Company is:
Principal Offic	ce Address:	Mailing Address:
8349 Sierra St. Na	varre, FL 32566	Same as Principal Office Address
(The Limited Liabilit business entity with	- Registered Agent, Registered by Company cannot serve as its own Region an active Florida registration.) The Florida street address of the Wilburn Leon Alvery Jr	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another registered agent are:
	Nam	w''
	8349 Sierra St.	- SEARC 23
	Florida street a	ddress (P.O. Box <u>NOT</u> acceptable)
	Navarre, FL 32566	FL
	City, S	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)

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:

MGR	Steven D Potts 7005 Jefferson St
	Navarre, FL 32566
MGRM	Wilburn Leon Alvey Jr.
	8349 Sierra St Navarre, FL 32566
(Use attachment if necessary)	
LE V: Effective date, if other than the fective date is listed, the date mus or 90 days after the date of filing.)	e date of filing: (OFFION) t be specific and cannot be more than five, busing

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.)

Wilburn Leon Alvey Jr.

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)