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SECRETARY OF STATE

K. SALY EXAMINER JAN 31 2014

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	ct: The ACCT Proj	ect LL	С	
SUBSE			ility Company	
The enc	losed Articles of Organization and fee(s) are submitte	ed for filing.	
Please re	eturn all correspondence concerning this	matter to the	following:	
	Lillie Moroles			
		Name o	f Person	
	Algenol Biofuels	Inc.		
		Firm/Co	ompany	
	16121 Lee Road			
		Add	ress	
	Fort Myers, FL 3	3912		
	lillia maralag@alganala	City/State ar	nd Zip Code	
	lillie.moroles@algenol.c		for future annual repo	ort notification)
For furth	er information concerning this matter, p	lease call:		·
Lillie	e Moroles	239	, <mark>498-20</mark> 0	0
	Name of Person	Area Code	Daytime Telep	hone Number
٦	is a check for the following amount: Filing Fee \$\int_{\text{Certificate of Status}}\$130.00 Filing Fee & Certificate of Status	Certif	00 Filing Fee & ied Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ster Circle

A	ARTICLES OF ORGANIZATION F	OR FLORIDA LIMITED LIAB	ILITY COMPANY	
A PARTICULAR E. M				一个
ARTICLE I - Nan			\$	ار المراجع الماري المراجع الم
The name of the Lif	nited Liability Company is:		7	10. 12
			`	26 C M
The ACCT Project LLC	C			ALLE SEE FLORING
	(Must end with the words "Lin	nited Liability Company, "L.I.	.C.," or "LLC.")	
	•	, ,	,	ني ح
ARTICLE II - Add	iress:			رق الشراح
The mailing address	and street address of the princip	oal office of the Limited Liabi	lity Company is:	2/2
		- 4		0
Principal Office A	ddress: N	Ialling Address:		
Altn: Legal Dept.		Attn: Legal Dept.		
16121 Lee Road		16121 Lee Road		_
Fort Myers, FL 33912		Fort Myers, FL 33912		
				
The name and the Fl	orida street address of the regist Quang J. Ha, General Counsel	ered agent are:		
	N	ame		
	16121 Lee Road			
	Florida street address (P.O.	Box NOT acceptable)		
	Fort Myers	FL 33912		
	City	Zip	_	
the place designed capacity. I further	l as registered agent and to accep ated in this certificate, I hereby ac agree to comply with the provisi I am familiar with and accept the	ccept the appointment as regis ons of all statutes relating to ti	tered agent and agree he proper and complet	to act in this te performance
		hapter 605, F.S	Q	
	_	1		
		<i>\(\lambda \)</i>		
	Mary -	The		
	Registered Agent's St	gnature (REQUIRED)		
	(/)//	/		

Page 1 of 2

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Algenol Biofuels Inc.
·	16121 Lee Road
	Fort Myers, FL 33912
ctive date is listed, the date must be spec	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date of	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.)	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.)	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90
CV: Effective date, if other than the date of citive date is listed, the date must be specifiling.) CVI: Other provisions, if any. EFOURED SIGNATURE: Signature of a factor of constitutes an affirmation under the citive date.	ober or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.
CV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) CVI: Other provisions, if any. EFOURED SIGNATURE: Signature of a men (In accordance with section 60 constitutes an affirmation under that any false info	aber or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document
CV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) EVI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a factor of constitutes an affirmation under that any false inforcement of the constitutes a third degree felocoustitutes at hird degree felocoustitutes at hird degree felocoustitutes.	ober or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. 25.0203 (1) (b) and the facts of perjury that the penalties of perjury that the facts stated herein are true. 25.0203 (1) (b) and the facts of perjury that the facts of the penalties of perjury that the facts of the penalties of perjury that the facts stated herein are true. 26.0203 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
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