

L15000143284

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(City/State/Zip/Phone #)

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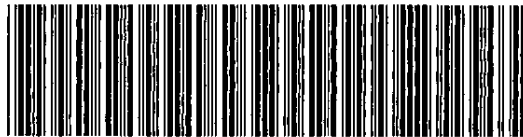
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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1/1

LINES, HINSON AND LINES

LAWYERS

121 NORTH MADISON STREET 32351
POST OFFICE BOX 550
QUINCY, FLORIDA 32353

WILLIAM D. LINES (1914 - 1992)

ALEXANDER L HINSON

BLUCHER B. LINES

August 18, 2015

TELEPHONE (850) 875-1300

TELECOPIER (850) 875-1350

New Filing Section
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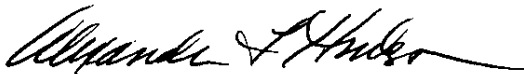
RE: ALLAGASH CONNECTIONS, LLC

To whom it may concern:

Enclosed please find for filing Articles of Organization For Florida Limited Liability Company for the referenced company. Also enclosed is our firm's check in the amount of \$155.00 for filing fee and one certified copy.

Thanking you for your assistance in this matter, I am,

Sincerely,



Alexander L. Hinson
Lines, Hinson and Lines

ALH:kc

Enc.

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AND
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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is: ALLGASH
CONNECTIONS, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal
office of the Limited Liability Company are:

Principal Office Address:

106 Magnolia Circle
Havana, FL 32333

Mailing Address:

106 Magnolia Circle
Havana, FL 32333

ARTICLE III - Registered Agent, Registered Office, & Registered
Agent's Signature:

Alexander L. Hinson
121 N. Madison St.
Quincy, FL 32351

*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, Florida Statutes.*



Alexander L. Hinson
Registered Agent's Signature

ARTICLE IV - The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

AMBR

John W. Dooner
106 Magnolia Circle
Havana, FL 32333

MGR

John W. Dooner
106 Magnolia Circle
Havana, FL 32333

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V - Effective Date:

These Articles shall have an effective date as of the date of filing.

REQUIRED SIGNATURE:

ALLAGASH CONNECTIONS, LLC

By: 

Signature of a member or authorized representative of a member.

John W. Dooner
106 Magnolia Circle
Havana, FL 32333

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

John W. Dooner

Typed or printed name of signee