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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

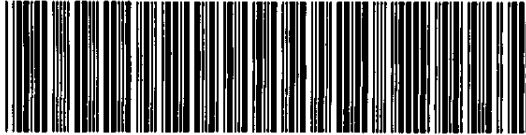
(Business Entity Name)

(Document Number)

Certified Copies                      Certificates of Status

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**W PAINTER**

# LEWIS, BRACKIN, FLOWERS, JOHNSON & SAWYER

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265 WEST MAIN STREET  
DOTHAN, ALABAMA 36301  
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DANIEL F. JOHNSON\*\*  
HOLLY L. SAWYER\*\*\*

September 9, 2015

REPLY TO:  
P.O. BOX 1165  
DOTHAN, ALABAMA 36302  
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\*\* Licensed in Alabama and Tennessee  
\*\*\* Licensed in Alabama and Florida

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

RE: *WMACJIHTRECM, LLC*

Dear Sir or Madam:

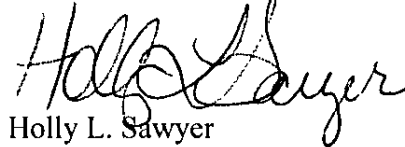
Enclosed please find the following:

1. Original and one copy of Articles of Organization;
2. Our check no. 6206 in the amount of \$155.00 for the filing fee, registered agent designation, and certified copy.

Should you have any questions or need anything further, please do not hesitate to contact me.

Very truly yours,

LEWIS, BRACKIN, FLOWERS, JOHNSON & SAWYER



Holly L. Sawyer

HLS/smj  
Enclosures

**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

The name of the Limited Liability Company is: WMACJIHTRECM, LLC

**ARTICLE II**

The street address of the principal office of the Limited Liability Company is:

c/o Qualico Steel Co., Inc.  
7797 E. State Highway 52  
Webb, Alabama 36376

The mailing address of the Limited Liability Company is:

P.O. Box 149  
Webb, Alabama 36376

**ARTICLE III**

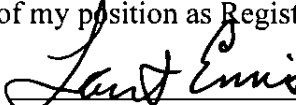
The purpose for which this Limited Liability Company is organized is: Any and all lawful business.

**ARTICLE IV**

The name and the Florida street address of the registered agent are:

Lamont Ennis  
4226 Highway 231 North  
Marianna, FL 32446

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.

  
\_\_\_\_\_  
Signature of Registered Agent

15 SEP 14 PM 11:11  
SECRETARY OF STATE  
ALABAMA

## ARTICLE V

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

Title:

Name and Address:

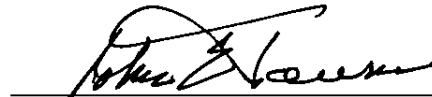
MGR

John E. Downs  
7797 E. Highway 52  
Webb, AL 36376

## ARTICLE VI

The effective date for this Limited Liability Company shall be: Date of filing.

Signature of a member:

  
\_\_\_\_\_  
John E. Downs