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| (Requesto | r's Name) |
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| (Address) | |
| (Address) | |
| (City/State | /Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Business | Entity Name) |
| (Documen | t Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to Filing C | Officer: |
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Office Use Only



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SECRETARY OF STATE

03-1-19

COVER LETTER

TO:

Registration Section

| Div | rision of Corporations | | | |
|-----------------|-----------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------------------|-------------------------------------------------|
| SUBJECT: | Southeast Contracting LLC | | | |
| SOBOLO II | Name of | Limited Liabil | ity Company | |
| The enclosed | d Articles of Organization and fee(s | s) are submitted | for filing. | |
| Please return | all correspondence concerning this | s matter to the f | following: | |
| | Rex A Holley | | | |
| - | | Name of | Person | |
| ; | Southeast Contracting LLC | | | |
| _ | | Firm/Co | mpany | |
| | 103 Petersburg Court | | | |
| - | | Addr | ess | |
| 1 | Dothan, Al. 36305 | | | |
| _ | | City/State an | d Zip Code | |
| re | ex.holley@live.com E-mail address: (to be u | sed for future a | unual report notificati | on) |
| For further inf | ormation concerning this matter, pl | | anida i opoli notilioti | ··· <i>y</i> |
| | Rex A Holley | 850 | 758-8984 | |
| _ | Name of Person | Area Code | Daytime Telephone | Number |
| Enclosed is a | a check for the following amount: ng Fee \$\sigma \frac{1}{2}\$130.00 Filing Fee & Certificate of Status | Certifi السا | 00 Filing Fee & Copy | \$160.00 Filing Fee, Certificate of Status & |
| | Mailing Address New Filing Section | | al copy is enclosed) Street Address New Filing Section | Certified Copy (additional copy is enclosed) |

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Southeast Contr | moting LLC | | | | |
|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------------------|--------------|--|
| ************************************** | t end with the words "Lim | nited Liability Company, | "L.L.C.," or "LLC.") | | |
| ARTICLE II - Address: The mailing address and str | reet address of the princip | al office of the Limited I | Liability Company is: | | |
| <u>Pri</u> | incipal Office Address: | | Mailing Address: | | |
| 103 Petersburg Dothan, Al 36 | | | Petersburg Court an, Al 36305 | | |
| | | | | | |
| ARTICLE III - Registere (The Limited Liability Com another business entity with | npany cannot serve as its o | own Registered Agent. Y | t's Signature: ou must designate an individual or | | |
| (The Limited Liability Con | npany cannot serve as its on han active Florida registr | own Registered Agent. Y ration.) | ou must designate an individual or | 16 | |
| (The Limited Liability Com another business entity with | npany cannot serve as its on han active Florida registr | own Registered Agent. Y ration.) ered agent are: | ou must designate an individual or | 16 FEB | |
| (The Limited Liability Com another business entity with | npany cannot serve as its on the serve as its of the an active Florida registrated address of the registrated address of the registrated and the server address of the registrated addr | own Registered Agent. Y ration.) ered agent are: | ou must designate an individual or | 16 FEB | |
| (The Limited Liability Com another business entity with | npany cannot serve as its on the serve as its of the an active Florida registrated address of the registrated address of the registrated and the server address of the registrated addr | own Registered Agent. Y ration.) ered agent are: Holley Name | ou must designate an individual or | 16 FEB 22 | |
| (The Limited Liability Com another business entity with | npany cannot serve as its of han active Florida registratreet address of the registration Caitlin Danielle F | own Registered Agent. Y ration.) ered agent are: Holley Name | ou must designate an individual or | 16 FEB 22 PM | |
| (The Limited Liability Com another business entity with | npany cannot serve as its of han active Florida registratreet address of the registration Caitlin Danielle F | own Registered Agent. Y ration.) ered agent are: Holley Name | ou must designate an individual or | 16 FEB 22 Ph | |

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

| AMBR Rex A Holley 103 Petersburg Court Dothan, Al 36305 Fig. 50 | Title: | | Name and Address: | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| AMBR Rex A Holley 103 Petersburg Court Dothan, Al 36305 Fig. 50 | 'AMBR" = Authorized | Member | | |
| AMBR Debra A Holley 103 Petersburg Court Dothan, Al 36305 Debra A Holley 103 Petersburg Court Dothan, Al 36305 Dothan, Al 36305 COURT DOTHAL Dothan, Al 36305 COURT DOTHAL COPTIONAL COPTI | 'MGR" = Manager | | | |
| Dothan, Al 36305 Debra A Holley Deb | MGR | | | |
| Debra A Holley 103 Petersburg Court Dothan, Al 36305 Dothan, Al 36305 CT C C C C C C C C C C C C C C C C C C | | | | <u> </u> |
| Debra A Holley 103 Petersburg Court 104 Petersburg Court 105 | | | Dothan, Al 36305 | <u> </u> |
| Use attachment if necessary) V: Effective date, if other than the date of filing: | | | | ≥22 ਜੋ |
| Use attachment if necessary) V: Effective date, if other than the date of filing: | AMBR | | Debra A Holley | *** |
| Use attachment if necessary) V: Effective date, if other than the date of filing: Civite date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not tent's effective date on the Department of State's records. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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. Rex A Holley Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent | | | | |
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| Use attachment if necessary) V: Effective date, if other than the date of filing: | | • | *************************************** | ਰਦੇ ਵ |
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| \$ 30.00 Certified Copy (Optional) | tive date is listed, the filing.) the date inserted in this ent's effective date on VI: Other provisions, ECOUIRED SIGNAT (S This do I am aw constitu | block does not mee the Department of the Departm | the applicable statutory filing requirent State's records. ber or an authorized representative of in accordance with section 605.0203 (1) Iformation submitted in a document to the lony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: | a member. (b), Florida Statutes. (c) Department of State |

ARTICLE IV-