Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone

: (323)962-8600

Fax Number

: (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

FLORIDA LIMITED LIABILITY CO.

Caloosa Materials, LLC

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Page Count	04
Estimated Charge	<b>\$155.00</b>

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M. MOON DEC 0 2 2016

## **COVER LETTER**

		· /				
TO: Registration Division of	n Section Corporations					
SUBJECT: Caloos	na Materials, LLC Name of Lin	mited Liability Co	этрапу			
The enclosed Articles	of Organization and fee(s) a	re submitted for i	iling.			
Please return all corre	spondence concerning this m	natter to the follow	ving:			
Cheven	ne Moselev					
		Name of Perso	n			
LegalZo	om.com. Inc.					
		Firm/Compan	У			
_100 W B	roadway, Suite 100	·				
		Address				
Glendale	c. CA 91210					7.5E
	C	City/State and Zip	Code		E	- (
_onlinefilings@le	egalzoom.com E-mail address: (to be use	d for future annu	al report notific	cation)	7-2	
For further information	on concerning this matter, plea	ase call:				-1
Chevenne Moseley			2-8600 ext 76		福日: 05	35
Nan	ne of Person	Area Code	Daytime T	elephone Number	05	E.
Enclosed is a check for	or the following amount:					(A)
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 Fill Certified Co		S160.00 Filing Fcc, Certificate of Status &		

(additional copy is enclosed)

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, PL 32301

Certified Copy (additional copy is enclosed)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Caloosa Materials, L	LC			
(1	Must end with the words "L	imited Liability Co	mpany, "L.L.C.," or ".	LLC.")
ARTICLE II - Addre				
The mailing address or	ad street address of the princ	ipal office of the I	imited Liability Comp	any is:
Principal Office Add	ress:	Mailing	Address;	
3323 Gulf City Road				····
Ruskin, FL 33570				
ARTICLE III - Regis	stered Agent, Registered O			
ARTICLE III - Regis (The Limited Liability another business enting		s own Registered a stration.)		
ARTICLE III - Regis (The Limited Liability another business enting	stered Agent, Registered C Company cannot serve as it y with an active Plorida regi	s own Registered a stration.) istered agent are:		
ARTICLE III - Regis (The Limited Liability another business enting	stered Agent, Registered C Company cannot serve as it y with an active Plorida regi rida street address of the reg	s own Registered a stration.)		
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ARTICLE III - Regis (The Limited Liability another business enting	stered Agent, Registered O Company cannot serve as it y with an active Plorida regin rida street address of the reg	s own Registered a stration.) istered agent are: Name	Agent. You must desig	
ARTICLE III - Regis (The Limited Liability another business enting	stered Agent, Registered O Company cannot serve as it y with an active Ptorida regin ida street address of the reg William W Casey	s own Registered a stration.) istered agent are: Name	Agent. You must desig	

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) William W Casey

> > (CONTINUED)

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Momber "MGR" = Manager		
AMBR. MGR	Chris LaFace	
	3323 Gulf City Road	
	Ruskin, Florida 33570	
AMBR. MGR	Chris Whitney	
	3323 Gulf Cilv Road	
	Ruskin, Florida 33570	
AMBR. MGR	William W Casey	
	3323 Gulf City Road	
	Ruskin, Florida 33570	
AMBR	Neil Whitney	
	3323 Gulf City Road	
	Ruskin, Florida 33570	
	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90	days al
fective date is listed, the date must be of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:		days al
of filing.)  LE VI: Other provisions, if any.		days al
Signature of  (In accordance with section  Constitutes an affirmation  I am aware that any false is  constitutes a third degree is	a member or an authorized representative of a member, in 605,0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)	
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