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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: KY/L GIN Construction L.L.C. Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kyle Shelton Gill Name of Person
2071 NATURAL Wells DK.
TALLALASSEE, F/A. 32305 City/State and Zip Code R Spears 2668 6 MAIL Cow E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert Spears at (950) 879 0775 Name of Person Area Code Daytime Telephone Number
S125.00 Filing Fee \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status (additional copy is enclosed) S125.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Taliahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ā	RT	ICI.	E I	-	Name:	
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The name of the Limited Liability Company is:

Kyle Gill CowstRaction LLC." or "LLC." or "LLC."

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
2071 NATURAL WELLS PR.	SAMENS OFFICE
TALLAMASSEE, FLA 32305	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Ryle Gill
Name

2071 NATURAL WELLS DR.
Florida street address (P.O. Box NOT acceptable)

TAUMASSER FLA 32305

City State Zip

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)

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ARTICLE IV- The name and address of each person author	orized to rimings and remaining	.ompany.		
Title: "AMBR" = Authorized Member	Name and Address: KYLE XIX ZO71 NATURAL WE	\mathcal{I}		
"MGR" = Managar , MG1Z				
·	TALLALASSES, F/W. 32	305		
			•	
(Use attachment if necessary) CLE V: Effective date, if other than the date of affective data is listed, the date must be succ				
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