

(Requestor's Name)		
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PICK-UP WAIT MA	IL	
(Duningan Entity Name)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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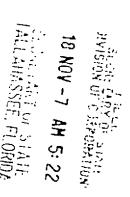
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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: K&B ASPHALTTECH, LLC. 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:		
Luis E. Gonzalez Name of Person		
M38 Aspnalt Tech, LLC.		
12250 SW 132 Court, Bay 106		
Miami, FL 33180 City/State and Zip Code Kb asphattechaatt net E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Mevin Contate at 305 251-9205 Name of Person Area Code Daytime Telephone Number		
Epclosed is a check for the following amount:		
7S125.00 Filing Fee S130.00 Filing Fee & S160.00 Filing Certificate of Status (additional copy is enclosed) S160.00 Filing Certified Copy (additional copy (add	Status &	
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:	
K&B Aspnalt Tech, La	<i>C.</i>
(Must contain the words "Limited Liability Company."	'L.IC.," 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:
12250 SW 132 COURT	Same
ARTICLE III - Registered Agent, Registered Office, & Registered Agen (The Limited Liability Company cannot serve as its own Registered Agent. Yanother business entity with an active Florida registration.)	t's Signature: ou must designate an individual or
The name and the Florida street address of the registered agent are:	

Florida street address (P.O. Box NOT acceptable)

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 (REQUIR

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. **ARTICLE VI:** Other provisions, if any. **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member : 5-This document is executed in accordance with section 605.0203 (1) (b), Florida-Statute 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.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agen

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)