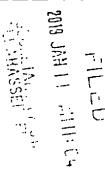
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

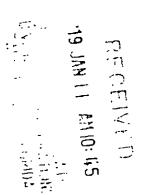
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COVER LETTER

	w Filing Section vision of Corporations			
SUBJECT:	DJ CONCRETE Name of Lim	Services ited Liability Company		
The enclose	ed Articles of Organization and fee(s) are	submitted for filing.		
Please retur	n all correspondence concerning this mat	ter to the following:		
	Donnie Con	5501 30		_
		Name of Person		2019
			<u>.</u>	<u>تة</u> پ
			AS.	- 32 -
	121 SUSSKEL	C FOCKET d	<u> </u>	
	F-+ White F	-L 32038 ity/State and Zip Code		# -
_	E-mail address: (to be used	for future annual report notification	n)	_
For the thering in	ntormation concerning this matter, please			
TOT REPUTED IN	normation concerning this matter, piease	Catt.		
	Donnie Cours brain	386, 984-6	879	
		rea Code Daytime Telephone	Number	
Enclosed is	a check for the following amount:			
\$125.00 Fi	-	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee. Certificate of Status of Certified Copy (additional copy is encl	
	Mailing Address	Street Address		
	New Filing Section Division of Corporations	New Filing Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
Enclosed is	Name of Person Are a check for the following amount: ling Fee \$\int_S130.00\ \text{Filing Fee & Certificate of Status}\$ Mailing Address New Filing Section Division of Corporations	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) Street Address New Filing Section Division of Corporation	S160.00 Filing Fee. Certificate of Status of Certified Copy (additional copy is enclosed)	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Must contain the words "Limited Liability Compar	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:
1215W Shelleracker Frunte Fl	
ARTICLE III - Registered Agent, Registered Office, & Registered A (The Limited Liability Company cannot serve as its own Registered Ager another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	ASS.
Dennie L Conso	on Si
121 SUS Shelle	rackendr
Florida street address (P.O. Box NO	L'acceptable)

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 Apent's Signature (REOLIRED)

(CONTINUED)

É

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	DONNIC LCONSON 1215W Shellcracker Fruhle FC	
	2019	
	JAH SELL FI	
(Use attachment if necessary)		
If an effective date is listed, the date must be spec he date of filing.)	f tiling:	
ARTICLE VI: Other provisions, if any.		
REOUIRED SIGNATURE:	101-511	
This document is execute I am aware that any false i	iber or an authorized representative of a member, d in accordance with section 605.0203 (1) (b). Florida Statutes, nformation submitted in a document to the Department of State felony as provided for in s.817.155, F.S.	
DONA	Typed or printed name of signee	

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

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)