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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| ☐ PICK-UP ☐ WAIT ☐ MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| |

Office Use Only

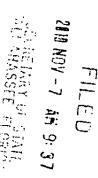
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COVER LETTER

| TO: | New Filing Section Division of Corporations |
|-----------|--|
| SUBJEC | Name of Limited Liability Company |
| The enc | losed Articles of Organization and feets) are submitted for filing. |
| Please r | eturn all correspondence concerning this matter to the following: |
| | |
| | |
| | |
| | |
| | 1/056 BRIGADE DR |
| | |
| | TACCAH-15SFF FL 32305 City/State and Zip Code |
| | E-mail address: (to be used for future annual report notification) |
| For furth | ner information concerning this matter, please call: |
| | Name of Person Area Code Daytime Telephone Number |
| Enclos | sed is a check for the following amount: |
| \$125. | On Filing Fee S130,00 Filing Fee & S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed) Certificate of Status & Certificate Copy (additional copy is enclosed) |
| | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division of Corporations Clifton Building 2661 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: | | | |
| CHADWELL'S CONSTRUCT FON LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") | چنو | 20 | |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: | SVEIVE CARTA | 15 NOV - | - - |
| Principal Office Address: Mailing Address: | S Distriction | ~-3 | 1 |
| 11056 BRIGADE DR 11056 BRIGADE DA | હુે ઉદ્ઘડ | 9: | C |
| TALLAHASSEE FL_32305 | 2 <u>2</u> | ထ | |
| 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:

DOWNAS CHADWELL IF 1105 6 BRIGAD DK Florida street address (P.O. Box NOT acceptable)

liaving 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. Thereby 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)

| Title: "AMBR" = Authorized Member | Name and Address: |
|--|--|
| "MGR" = Manager | |
| | |
| | |
| ΛΛ CQ | BRANDON CHAPWELL |
| MGR_ | 11056 BLIGADE DK |
| | TALLAHASSEE FL 32305 53 |
| MGR | DODGLAS CHADWELL II THE |
| | 11056 BRIGADE DK |
| Mak | THUMHASSEE FC 37305 5 |
| Max | DIUXIAS CHADWELL ST |
| | 11056 BREGARE DK |
| | THUMHASSEF TC SZ305 |
| | |
| (Hise attachment if necessary) | |
| (Use attachment if necessary) | |
| SLE W. Definition data Wather than t | he date of tiling: |
| LE V: Effective date, it other than t | t be specific and cannot be more than five business days prior to or 90 days |
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| TLE V: Effective date, it other than to effective date is listed, the date must e of filing.) If the date inserted in this block document's effective date on the Department's other provisions, if any. REOURED SIGNATURE: | t be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be lirtment of State's records. |
| TLE V: Effective date, it other than to effective date is listed, the date must e of filing.) If the date inserted in this block document's effective date on the Department's effective date in this block document's effective date on the Department's effective | t be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be lirtment of State's records. |
| The V: Effective date, it other than to effective date is listed, the date must e of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department. REOURED SIGNATURE: Signature This document is an aware that | t be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be lirtment of State's records. For a member or an authorized representative of a member, is executed in accordance with section 605.0203 (1) (b). Florida Statutes, any false information submitted in a document to the Department of State |
| The V: Effective date, it other than to effective date is listed, the date must e of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department. REOURED SIGNATURE: Signature This document is an aware that | t be specific and cannot be more than five business days prior to or 90 days es not meet the applicable statutory filing requirements, this date will not be lirtment of State's records. |

Filing Fees;

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

5 30,00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)