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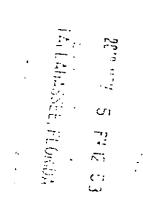
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#### **COVER LETTER**

New Filing Section Division of Corporations

TO:

SHRIFCT	Integral Constr	iction S	ervices of Tallahassee,	LL
Sobsect.	Name of	Limited Liabili	ty Company	
The enclosed	Articles of Organization and fee(s)	are submitted	for filing.	
Please return	all correspondence concerning this	matter to the fo	ollowing:	
k	KAYE C. HYDE			
_		Name of	Person	
S	SMITH THOMPSON SHAW			
_		Firm/Co	mpany	
3	520 THOMASVILLE ROAD			
-		Addre	ess	
1	TALLAHASSEE, FL 32309			
-	.1.1.0	City/State and	d Zip Code	
<u>ny</u>	/dek@stslaw.com E-mail address: (to be u	sed for future a	innual report notification)	
For further inf	ormation concerning this matter, plo	ease call:		
К	Caye Hyde	850	893-4105	
_	Name of Person		Daytime Telephone Number	
	ng Fee S130.00 Filing Fee & Certificate of Status	└──Certifi	00 Filing Fee & \$160.00 Filing Fee. ed Copy Certificate of Status & Certified Copy (additional copy is enclosed)	ed)
	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 OF INTEGRAL CONSTRUCTION SERVICES OF TALLAHASSEE, LLC

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

# 1. NAME.

The name of the Limited Liability Company is **INTEGRAL CONSTRUCTION SERVICES OF TALLAHASSEE**, **LLC** (hereinafter referred to as the "Company").

### 2. **PERIOD OF DURATION**.

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

#### 3. **PURPOSE**.

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

#### 4. MAILING ADDRESS OF BUSINESS.

The mailing address of the business is 300 South Duval Street, Suite 412A, Tallahassee, Florida 32301. Such address may be changed from time to time as provided in the Operating Agreement.

# 5. ADDRESS OF PLACE OF BUSINESS.

The street address of the place of business in Florida for the Company is 300 South Duval Street, Suite 412A, Tallahassee, Florida 32301. Such address may be changed from time to time as provided in the Operating Agreement.

# 6. REGISTERED AGENT AND OFFICE.

The initial registered agent in Florida for the Company is: **ANDREW J. POWER** at located at 3520 Thomasville Road, Fourth Floor, Tallahassee, FL 32309.

#### 7. MANAGEMENT.

The names and address of the manager of the Limited Liability Company is:

Joshua Smith 300 South Duval Street, Suite 412A Tallahassee, FL 32301

DATED this 13th day of November, 2019.

JOSHUA SMITH

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited liability company is **INTEGRAL CONSTRUCTION SERVICES OF TALLAHSSEE, LLC.** 
  - 2. The name of the registered agent and office is: **ANDREW J. POWER**; at 3520 Thomasville Road, Fourth Floor, Tallahassee, FL 32309.

#### ACKNOWLEDGEMENT

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.

ANDREW J.-POWER, Registered Agent