| (Re | questor's Name) | ··· |
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| (Cit | y/State/Zip/Phone # | f) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Name |) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to | Filing Officer | |
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Office Use Only



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J. FASON

JAN 09 2020

COVER LETTER

| | | | | (additional copy is enclosed) |
|----------------|-------------------------------|-------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------|
| □\$125.00 | Filing Fee | Certificate of Status | □\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy |
| Enclosed is | a check for t | he following amount: | | |
| | Nan | ne of Person Ar | ea Code Daytime Telephor | ne Number |
| | Charles | s Beijer au c | 850,643-64 | 68 |
| For further in | nformation co | incerning this matter, please | call: | |
| - | | E-mail address: (to be used t | or future annual report notificat | ion) |
| | (| fbailey39 | Duaho.com | |
| | Blo | untstown | ty/State and Zip Code Dyahov.com for furdre annual report notificat | / |
| | | | Address | |
| | 884 | ta sw c | ounty Rd | 275 |
| | | painey ! | Construction Firm/Company | |
| | \cap \mathbf{r} | = Bailey | Construction | 110 |
| | | <u> </u> | Name of Person | |
| | | Charles | Bailey | |
| Please retur | m all correspo | ondence concerning this mat | ter to the following: | |
| The enclose | ed Articles of | Organization and fee(s) are | submitted for filing. | |
| SUBJECT | : _CE | Name of Limi | enstruction Lited Liability Company | |
| | 15 | Bailou Co | netaution 1 | LC |
| Di | ew Filing Sec vision of Co | rporations | | |

New Filing Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE 1 - Name: | |
|-----------------------------------------------|--|
| The name of the Limited Liability Company is: | |

(Must conatin the words "Umited Liability Company, "L.L.C.," 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: |
|---------------------------|------------------|
| 8842 SW County Rd 275 | Same |
| Blowntstown FC 32424 | |

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:

Charles Bailey

8842 SW County Rd 275
Florida street address (P.O. Box NOT acceptable)

Blown town FL 32424
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.,

Charles Buelly
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

| Title: | Name and Address: |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| "AMBR" = Authorized Mem | per |
| "MGR" = Manager | |
| MGR | Charles F Bailey |
| | 8842 Sw County ed 275 |
| | BICURTSTOWN A 32424 |
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| (Use attachment if necessary) | |
| FICLE V: Effective date, if other the effective date is listed, the date date of filing.) (e) If the date inserted in this block | nan the date of filing: |
| TICLE V: Effective date, if other the effective date is listed, the date late of filing.) | nan the date of filing: |
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| CICLE V: Effective date, if other the effective date is listed, the date date of filing.) e: If the date inserted in this block document's effective date on the Effective date | innust be specific and cannot be more than five business days prior to or 90 days after a does not meet the applicable statutory filing requirements, this date will not be listed as department of State's records. Current a member or an authorized representative of a member. In this executed in accordance with section 605.0203 (1) (b), Florida Statutes, and any false information submitted in a document to the Department of State. |

Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)