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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: PRIORITY DRILLING 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:
Darren Eaton Name of Person
Priority Drilling Firm/Company
1432 Lake Dr. W
Okeechobee FL 34974 City/State and Zip Code Well pumpinc@amail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Darren Eaton at (419) 389-3052 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) □\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section New Filing Section Division

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

The name of the Limited Liability Company is:

Priority Drilling LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

ARTICLE 1 - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1432 Lake Dr. W OKeechobee, Fl 34974

1432 Lake Dr. W OKeechobee, FL 34974

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must besignate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Darren Eaton

1432 Lake Dr. W Florida street address (P.O. Box NOT acceptable)

Okeechobee FL 34974
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 (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
	Darren Eaton 1432 lake DR. W OKEECHOBER, FL 34974
	
(Use attachment if necessary)	
(If an effective date is listed, the date must be : the date of filing.)	the of filing: \(\langle \langle -\langle -\lan
ARTICLE VI: Other provisions, if any.	,
REQUIRED SIGNATURE:	~ Eater_
Signature of a r This document is exec I am aware that any fa	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
Dar	Typed or printed name of signee

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

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
 \$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

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