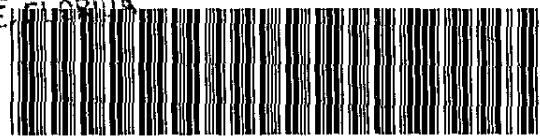


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2005 MAY 16 P 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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05/16/05--01044--004 **155.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

DATE: 05/12/2005

FILED

TO: Registration Section
Division of Corporations

2005 MAY 16 P 12:39

SUBJECT: CARONE PAPERHANGING, LLC
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory H. Zogran, Esq.
(Name of Person)

Gregory H. Zogran, P.A.
(Firm/Company)

7000 SE Federal Hwy., Suite 300
(Address)

Stuart, FL 34997
(City/State and Zip Code)

For further information concerning this matter, please call:

Gregory H. Zogran at (772) 220-9699
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FILED
FLORIDA LIMITED LIABILITY COMPANY

2005 MAY 16 P 12:39

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CARONE PAPERHANGING, LLC

ARTICLE II - Address:

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

2156 SE Herron Avenue
Port St. Lucie, FL 34952

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

John J. Carone

Name of Registered Agent

2156 SE Herron Avenue

Street Address (P.O. Box NOT acceptable)

Port St. Lucie, FL 34952

City, State, and 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 608, F.S.

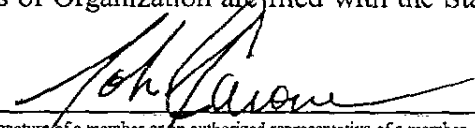

Registered Agent's Signature

ARTICLE IV - Management:

The company shall be managed by the members as reflected in Schedule A.

ARTICLE V - Effective date:

The effective date shall be the date the Articles of Organization are filed with the State of Florida and the duration shall be **perpetual**.


Signature of a member or an authorized representative of a member

Type or print name: **John Carone**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SCHEDULE A

FILED

2005 MAY 16 P 12: 39

List name of Member, Membership Interest, address, social security number, and amount of capital contribution (use a separate page for each Member):

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JOHN CARONE, MGR.

Name of Member

One Hundred (100%)

Membership Percentage Interest

2156 SE Herron Avenue

Street Address

Port St. Lucie, FL 34952

City, State, Zip

044-36-4728

Taxpayer I.D./Social Security Number

Five Hundred (\$500.00) Dollars

Capital Contribution