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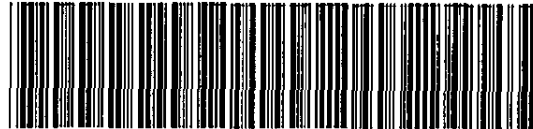
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**JEFFREY MICHAEL SORONEN**

**6053 LEWIS DRIVE  
ZEPHYRHILLS, FL 33542  
TEL. 813-966-7182  
FAX 813-782-7185**

July 26, 2005

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

RE: JMS Wood Creations

Dear Ma'am/Sir:

Enclosed please find my Articles of Organization and Designation of Registered Agent for the registration of the above-referenced entity as an LLC. I have requested an effective date of July 31, 2005.

Additionally, please find enclosed my check in the amount of One Hundred Sixty (\$160.00) Dollars, representing the following:

\$125.00	Filing Fee
30.00	Certified Copies
5.00	Certificate of LLC Status

I have enclosed an additional copy of the Articles and a stamped return envelope back to me, for your convenience in returning the Certificate of LLC Status and certified copies.

Please return all correspondence concerning this matter to me at the above address. If you require further information, or have any questions or comments, please do not hesitate to contact me at the phone number listed above.

Very truly yours,



Jeffrey Michael Soronen

JMS/ab  
Encl.

**ARTICLES OF ORGANIZATION FOR**  
**JMS WOOD CREATIONS, LLC**

**ARTICLE I**

**Name**

The name of the Limited Liability Company of issue herein is:

***JMS WOOD CREATIONS, LLC***

**ARTICLE II**

**Address**

The **mailing address** of JMS Wood Creations, LLC is: 6053 Lewis Drive,  
Zephyrhills, FL 33542.

The **principal place of business** of JMS Wood Creations, LLC is: 6053 Lewis  
Drive, Zephyrhills, FL 33542.

**ARTICLE III**

**Registered Agent, Registered Office, & Registered Agent's Signature**

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

Jeffrey Michael Soronen  
6053 Lewis Drive  
Zephyrhills, FL 33542

*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, Florida Statutes.*

  
Registered Agent Signature

05 AUG - 1 PM 1:00

**ARTICLE IV**  
**Manager(s) or Managing Members**

The following are the names and addresses of each Manager or Managing Member:


Manager ("MGR") –  
Jeffrey Michael Soronen  
6053 Lewis Drive  
Zephyrhills, FL 33542

**ARTICLE V**  
**Effective Date**

These Articles of Organization for JMS Wood Creations, LLC shall be effective as of July 31, 2005 and request that the Florida Department of State permit such effective date.

  
\_\_\_\_\_  
Signature – Jeffrey Michael Soronen

(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.)

  
\_\_\_\_\_  
Signature – Jeffrey Michael Soronen

Printed Name: JEFFREY MICHAEL SORONEN