

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : GREENSPOON MARDER, P.A.
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

fds.tonys@gmail.com

FLORIDA LIMITED LIABILITY CO.
FACTORY DIRECT SUPPLY & FABRICATION, LLC

Certificate of Status	0
Certified Copy	0
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From:

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**ARTICLES OF ORGANIZATION
OF
FACTORY DIRECT SUPPLY & FABRICATION, LLC**

ARTICLE I - Name:

The name of the limited liability company is Factory Direct Supply & Fabrication, LLC.

ARTICLE II - Duration:

The period of duration for the limited liability company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the limited liability company is 4839 Westroads Drive, West Palm Beach, Florida 33407.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this limited liability company is Anthony Sardinia, 4839 Westroads Drive, West Palm Beach, Florida 33407.

ARTICLE V - Management:

The limited liability company is to be managed by one or more managers and the name and address of the initial manager who is to serve as a manager is:

Anthony Sardinia
P.O. Box 14079
Fort Pierce, Florida 34979

16 JUL 19 AM 9:02
ATTORNEY GENERAL
ALABAMA SEC. FLORIDA

JUL-19-2016 1303

From:

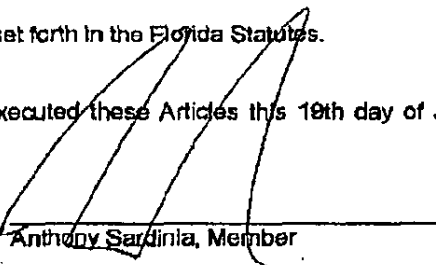
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The managers of this limited liability company: (i) may be replaced by the members and (ii) shall be elected by the members, each as provided for in the Operating Agreement of this limited liability company if one exits, otherwise as set forth in the Florida Statutes.

Whereof, the undersigned member has executed these Articles this 19th day of July, 2016.



Anthony Sardinia, Member

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

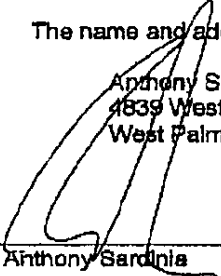
PURSUANT TO THE PROVISIONS OF SECTION 605.0113 OR 605.0902, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

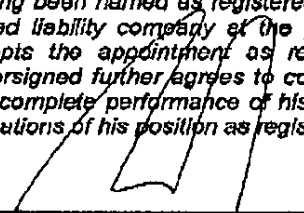
Factory Direct Supply & Fabrication, LLC

2. The name and address of the registered agent and office is:

Anthony Sardinia
4839 Westroads Drive
West Palm Beach, Florida 33407

By:  _____
Anthony Sardinia

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and the undersigned is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 605, F.S.

 _____
Anthony Sardinia

(Signature)

(Date)

July 19, 2016