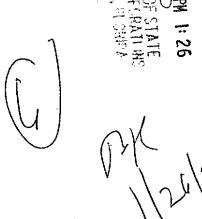


3424-18 Old St. Augustine Road Phone 850-671-1741 Tallahassee, Florida 32311 Fax 850-671-3517 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 000002411640---01/26/98--01057--028 (Corporation Name) (Document #) ****285.00 (Corporation Name) (Document #) Pick up time Certified Copy Mail out Will wait Certificate of Status Photocopy NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
 Limited Partnership
Reinstatement
Trademark
Other



Examiner's Initials			



FLORIDA DEPARTMENT OF STATE

Secretary of State

January 26, 1998

ACCURATE FILING & SEARCH

TALLAHASSEE, FL

SUBJECT: HI-LITE SAFETY SYSTEMS, L.L.C.

Ref. Number: W98000001789

We have received your document for HI-LITE SAFETY SYSTEMS, L.L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The affidavit must state the amount of cash contributed, the amount of property contributed, and the total amount of cash or property anticipated to be contributed.

If some of the contributions consist of property, a BRIEF description of the property must be included.

If it is the case that the \$400,000.00 anticipated to be contributed to this company is totally cash, you could state that, and add a statement that "NO PROPERTY HAS BEEN OR WILL BE CONTRIBUTED BY THE MEMBERS."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 698A00004307

RECEIVED

98 JAN 27 AM 8 2

IVISION OF CORPOR

TALLAHASSEE, FLOR

ARTICLES OF ORGANIZATION

Article 1 Name

The name of the limited liability company is:

Hi-Lite Safety Systems, L.L.C.

Article 2 Address

The mailing address and the street address of the principal office of the limited liability company is:

Mailing Address
P.O. Box 33165
Palm Beach Gardens, FL 33420

Street Address 1519 Ocean Dunes Jupiter, FL 33477

Article 3 **Duration**

The period of duration for the limited liability company shall be:

Perpetual

Article 4 Management

The business and affairs of the limited liability company shall be managed by a manager, and the name and address of such manager, who is to serve as manager until the first annual meeting of its members or until his successor is duly elected and qualified, is:

Jeffrey L. Hymer 1519 Ocean Dunes Jupiter, FL 33477

Article 5 Members' Right to Continue Business

Notwithstanding the death, bankruptcy, or dissolution of a member, or upon the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the business of the limited liability company may be continued if the remaining member consents to the continuation of the limited liability company within ninety (90) days of the date of the termination of a member's membership in the limited liability



company, and approve the admission of such additional members as may be necessary under applicable law.

The undersigned member has executed these Articles of Organization this <u>2</u>9 January, 1998.

Hi-Lite Safety Systems, L.L.C.

y: Harmer Harmer

Its: Managing Member

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member Hi-Lite Safety Systems, L.L.C. deposes and says:

- 1. The above limited liability company has at least two (2) members.
- 2 The total amount of cash anticipated to be contributed by the members is Four Hundred Thousand (\$400,000) Dollars.

 "NO PROPERTY HAS BEEN OR WILL BE CONTRIBUTED BY THE MEMBERS."

Date: January 24th 1998

Jeffrey/L. Hymer Managing Member

577-11 012398 1/23/98 2:41 PM

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, 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:

Hi-Lite Safety Systems, L.L.C.

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

Jeffrey L. Hymer 1519 Ocean Dunes Jupiter, FL 33477

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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.

Date: January 24 1998

577-11 012398 1/23/98 2:49 PM Jeffre