L000000004181 KOCHMAN & BRAUN PLC Esperanté 222 Lakeview Avenue, Suite 950 West Palm Beach, Florida 33401 City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status NEW FILINGS **AMENDMENTS** Profit Amendment Resignation of R.A., Officer/Director Not for Profit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Merger Other OTHER FILINGS REGISTRATION/OUALIFICATION Annual Report Foreign-Fictitious Name Limited Partnership Reinstatement Trademark

Examiner's Initials

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 31, 2000

KOCHMAN & BRAUN PLC 222 LAKEVIEW AVENUE, SUITE 950 WEST PALM BEACH, FL 33401

SUBJECT: COPPER LLC Ref. Number: W00000008645

We have received your document for COPPER LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 000A00017794

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Copper LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 14600 32 Mile Road

Washington Township, MI 48095

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

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

Thomas L. LaSalle
Name 5353 N. Federal Highway, Suite 405
Florida street address (P.O. Box NOT acceptable) Fr. Lauderdale FL 33308
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 (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(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.)

Joseph A. Karam

Typed or printed name of signee

FILING FEES:

\$ 100.06 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL) SNOLLVER WELL BE TO STATE