

DENNIS TAPP INTERIORS

4842 U.S. Highway 42 ■ Louisville, KY 40222 ■ 502.339.9800 ■ FAX 502.339.9827 "The Complete Design Firm"

August 1, 2000

Florida Department of State Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 900003346729--2 -08/04/00--01075--008 ****125.00 ****125.00

Enclosed please find our Articles of Organization for a Florida Limited Liability Company and the Certificate of Designation of Registered Agent with our check # 1443 in the amount of \$125.00 for filing fees.

At this time, the building we are to occupy is still under construction with an estimated date of occupancy set for November 1, 2000.

If possible, until such time as we take possession of the Florida location, all mailings and the Letter of Acknowledgment for this filing should be addressed to:

Dennis Tapp Interiors 4942 U. S. Hwy 42 Louisville, KY 40222

Sincerely,

Dennis Tapp

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SEGRICIANY STATE
TALLAHASSEE FLORIDA



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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| ARTICLE I - Name: The name of the Limited Liability Company is: |
| Dennis Tapp Interiors, LLC |
| ARTICLE Min Andress: The mailing address and street address of the principal office of the Limited Liability Company is: |
| 1855 Griffin Road Suite C-316 Dania Beach, FL 33004 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: |
| Dennis L. Tapp |
| Name |
| 3300 NE 192nd St. #1018 |
| Florida street address (P.O. Box NOT acceptable) |
| Aventura, FL 33180 |
| 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 am familiar with and accept the |
| relating to the proper and complete performance of my dunes, and an juminar with and accept the |
| obligations of my position as registered agent as provided for the Chapter 608, F.S |
| |
| Registered Agent's Signature |
| Agristense Agent 8 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 of 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.)

Y L. TAPP
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)