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Account Name	:	BUSINESS FILINGS
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Phone	:	(608)827-5300
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LIMITED LIABILITY COMPANY

On The Island Hardware LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00



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ARTICLES OF ORGANIZATION OF On The Island Hardware LLC

ARTICLE I NAME

The name of the limited liability company shall be: On The Island Hardware LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1003 Maldonado Dr., Pensacola Beach, Florida 32561.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: James Allen King, 1003 Maldonado Dr., Pensacola Beach, Florida 32561. Located in the County of Escambia.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2040.

ARTICLE V MANAGERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are; James Allen King, 1003 Maldonado Dr., Pensacola Beach, Florida 32561



Richard Oster, Authorized Representative Prepared by Richard Oster, Business Filings, 8025 Excelsior Dr. Suite 200, Madison, WI 53717. (608) 827-5300.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: On The Island Hardware LLC

The name and address of the registered agent and office is James Allen King, 1003 Maldonado Dr., Pensacola Beach, Florida 32561. Located in the County of Escambia.

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Signature

Date: September 8, 2000 FILED GELLE TARY OF STATE CAHASSEE FLORIDA