January 18, 2001

00789-02595-00671

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 850.487.6051

WO1-1714

To Whom It May Concern:

Attached is completed Articles of Organization and check in the amount of \$125.00 for filing fees. Should you have any questions please call 941.659.4003.

James R. Smith (Rusty)

Landmark Kitchen Design

571 3rd Ave. north naples, Fr 34102



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 23, 2001

JAMES R. SMITH 571 3RD AVE. NORTH NAPLES, FL 34102

SUBJECT: LANDMARK KITCHEN DESIGN

Ref. Number: W01000001714

We have received your document for LANDMARK KITCHEN DESIGN and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

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: 601A00003689

Division of Communitions D.O. DOV 6997 Tollahagges Florida 99914

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

- and Mark Kitchen Design, LoLoc.

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

The mailing address and street address of the principal office of the Limited Liability Company is:

Florida street address (P.O. Box NOT acceptable)

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

571 350 Ave Worth Naples, FL 3410Z

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

City, State, and Zip		-
Having been named as registered agent and to accept service of process for the above stated libility 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 provision statutes relating to the proper and complete performance of my duties, and I am familiar with 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	s of a and	
(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.) Typed or printed name of signee	01 FEB -1 AM11: 13	SECRETARY OF STATE SECRETARY OF STATE

\$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)