Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

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: (850)205-0383

From:

Account Name

: BROAD AND CASSEL (BOCA RATON)

Account Number : 076376001555

Phone

: (561)483-7000

Fax Number

: (561)483-7321

LIMITED LIABILITY COMPANY

Rex Lumber, LLC

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Certificate of Status Certified Copy	0
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laws of the State of Florida.

Fax Audit Number: H010001124014

ARTICLES OF ORGANIZATION

OF

REX LUMBER, LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the

ARTICLE I

The name of this limited liability company shall be: REX LUMBER, LLC (the "Company").

ARTICLE II

The mailing address and street address of the principal office of the limited liability company shall be 1820 Highway 2 East, Graceville, Florida 32440, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is 1820 Highway 2 East, Graceville, Florida 32440. The initial registered agent at that address is C. Finley

ARTICLE IV

The limited liability company will be a manager-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this (1) day of

Fax Audit Number: H010001124014

Fax Audit No. H010001124014

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST - The name of the limited liability company is REX LUMBER, LLC.

SECOND - The name and address of the registered agent and office is:

C. Finley McRae 1820 Highway 2 East Graceville, Florida 32440

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 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.

Dated this 6th day of November, 2001.

C. Finley McRae, Registered Agent

Fax Audit Number: #010001124014

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