

L02000012832

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

RECEIVED
02 MAY 24 PM 3:41
DIVISION OF CORPORATIONS
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

CUSTOM METAL WORKS LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

L02-12832
OK

**ARTICLES OF ORGANIZATION
CUSTOM METAL WORKS LLC.**

ARTICLE I NAME

The name of the limited liability company shall be **CUSTOM METAL WORKS LLC.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be 14057 SW 140 st Miami, FL 33183 Dade county

Article III INITIAL REGISTERED AGENT

The name and address of the initial registered agent is **TODD KETCHAM SR**
14057 SW 140 ST MIAMI, FL 33183. DADE COUNTY

ARTICLE IV DURATION

The duration for the limited liability company shall be 12/31 /42

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the name and address of the member of the limited liability company is

TODD KETCHAM SR 14057 SW 140 ST MIAMI, FL 33183

SUSAN KETCHAM 14057 SW 140 ST MIAMI, FL 33183


TODD KETCHAM SR

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 MAY 24 PM 3:48

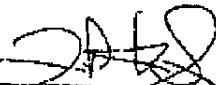
FILED

CERTIFICATE OF DESIGNATION**REGISTERED AGENT\REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida statutes, the undersigned organized L.L.C. under the laws of the state of Florida, submits the following statement in designating the registered office registered agent, in the state of Florida.

1. The name of the L.L.C. IS CUSTOM METAL WORKS L.L.C.
2. The name and address of the registered agent is TODD KEYCHAM SR 14057 SW 140 ST MIAMI, FL 33183

SIGNATURE



TITLE

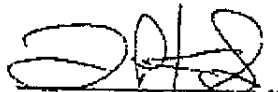
PRES.

DATE

5-1-02

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED L.L.C. AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THE CAPACITY I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I'M FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE

5-1-02

SECRETARY OF STATE
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