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LIMITED LIABILITY COMPANY

Progressive Office Interiors LLC

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

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**ARTICLES OF ORGANIZATION
OF
Progressive Office Interiors LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Progressive Office Interiors LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 2062 Blue View Ct., Navarre, Florida 32566.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Gary D. Poe, 2062 Blue View Ct., Navarre, Florida 32566. Located in the County of Santa Rosa.


ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2042.

ARTICLE V MANAGERS/MEMBERS

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:

Gary Poe, 2062 Blue View Ct., Navarre, Florida 32566
Adam Poe, 2062 Blue View Ct., Navarre, Florida 32566


Mark Schiff, Assistant Vice President
Business Filings Incorporated
Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

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TALLAHASSEE, FLORIDA

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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: **Progressive Office Interiors LLC**

The name and address of the registered agent and office is Gary D. Poe, 2062 Blue View
Ct., Navarre, Florida 32566. Located in the County of Santa Rosa.

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: _____

Gary D. Poe

Date: October 31, 2002

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TALLAHASSEE, FLORIDA

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