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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN III 16 2003

## ADVANCED TAX CENTRE

A Firm of Enrolled Agents

3819 Murrell Road, Suite E, Rockledge, FL 32955

James A. Naff, EA\*

E. Ann Shroll, EA\*

Edward F. Chambers, EA

Phone: (321) 636-8561

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E-Mail: [atc777@bellsouth.net](mailto:atc777@bellsouth.net)

Wednesday, July 09, 2003

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee FL 32314

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TALLAHASSEE, FLORIDA

Gentlemen:

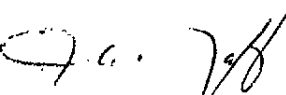
Re: Commercial Trim Specialties, LLC  
Katherine E Croy, Member

Enclosed is an original and one (1) copy of the Articles of Organization for a Florida Limited Liability Company. Also enclosed is a check in the amount of \$ 160.00 for the filing fee. Certificate fee and Registered Agent fee for the Limited Liability Company.

Please mail papers to:

James A. Naff, EA  
Advanced Tax Centre, Inc.  
3819 Murrell Road, Ste E  
Rockledge FL 32955

Thank you.

  
James A. Naff, EA

Enclosures: Check # 163  
Articles of Organization

*\* Graduate Fellow of The National Tax Practice Institute  
Member: National Association of Enrolled Agents  
Member: National Society of Accountants*

*Licensed to Represent Taxpayers at all Administrative Levels of the Internal Revenue Service  
and State Department of Revenue.*

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I – Name

The name of the Limited Liability Company is:

COMMERCIAL TRIM SPECIALTIES, LLC

## ARTICLE II – Address:

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

430 Heathrow Circle  
Rockledge, FL 32955

## ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Katherine E Croy

Name

430 Heathrow Circle

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

Rockledge, FL 32955

City, State, and Zip

*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 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 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 is, therefore, a manager – managed company.

(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.)

Katherine E Croy

Typed or printed name of signee

### Filing Fees:

\$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)

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TALLAHASSEE, FLORIDA