Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247 Phone : (305)674-3313 Fax Number : (305)675-2811

LIMITED LIABILITY COMPANY

HARBOR WOODWORKS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: HARBOR WOODWORKS, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability 1010 PARK CT.

SAFETY HARBOR, FL 34695

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent MIKE LOHMEYER 1010 PARK CT. SAFETY HARBOR, FL 34695

Having been named as registered agent to accept service of process for the above stated 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 all 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

The Limited Liability Company will be managed by one or more members.

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ARTICLE V

The name and address of the managing member of the LLC is: MANAGING MEMBER:
MIKE LOHMEYER
8282 WESTERN WAY CIRCLE, SUITE 1241
JACKSONVILLE, FL 32256

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.

MIKE LOHMEYER

Typed or printed name of signee

SECRETARY OF STATE
SALI AHASSEE, FLORID

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