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(Requestor's Name)		
	M AND M ENCLOSURES & 2575 N.E. 15TH OMPANO BEACH (954) 351-1	FENCES I TERR
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(City/State/Zip/Phone #)		
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 27, 2004

M & M ENCLOSURES 2575 N.E. 15TH TERRACE POMPANO BEACH, FL 33064

SUBJECT: M & M ENCLOSURES LLC.

Ref. Number: W04000003484

We have received your document for M & M ENCLOSURES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 004A00005496

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:			
M & M Enclosures	LLC		
*RTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
rincipal Office Address:	Maili; g Address:		
1/14NE 18AY	2575 NE 15 Tenne		
Ft Layer	Pampano Beh		
FL 33304	FLANDA 33064		
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered Name 2575 VE 15 Tex Florida street address (P.O. Box NO	FEB - 5 AM 8: 4 CHETARY OF STATE AHASSEE, FLORID		

Having o un 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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED) The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: 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.)

ARTICLE IV- Manager(s) or Managing Member(s):

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

5 30.66 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee