

02/06/2004 09:14 FAX

Division of Corporations

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Florida Department of State
Division of Corporations
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Account Number : 076077000355
Phone : (813) 223-7000
Fax Number : (813) 229-4133

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

ROLLIN ARTS CUSTOM METAL FABRICATION, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ROLLIN ARTS CUSTOM METAL FABRICATION, LLC

ARTICLE II - Address:

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

Principal Office Address:

311 WEST 11TH STREET
RIVERIA BEACH, FL 33404

Mailing Address:

10681 SUMMERTIME LANE
ROYAL PALM BEACH, FL 33411

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

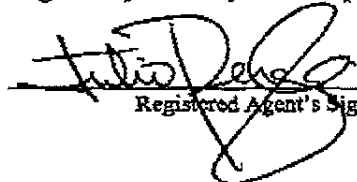
The name and the Florida street address of the registered agent are:

JULIO PEREZ, IV
Name

10681 SUMMERTIME LANE
Florida street address (P.O. Box NOT acceptable)

ROYAL PALM BEACH, FLORIDA 33411
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, Florida Statutes..


Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

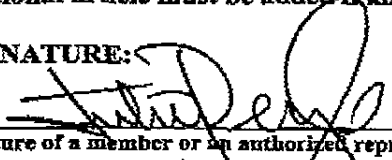
MGR _____ JULIO PEREZ, IV
10681 SUMMERTIME LANE
ROYAL PALM BEACH, FL 33411

MGRM _____ JULIO PEREZ, IV
10681 SUMMERTIME LANE
ROYAL PALM BEACH, FL 33411

(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.)

JULIO PEREZ, IV

Typed or printed name of signer

- 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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED