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Special Instructions to Filing Officer:		
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301

(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222 H.B. Trim &RC Art of Inc. File\_ LTD Partnership File\_\_\_\_\_ Foreign Corp. File\_\_\_\_\_ L.C. File Fictitious Name File Trade/Service Mark\_\_\_\_\_\_, Merger File\_ Art, of Amend. File\_\_\_\_\_ RA Resignation\_\_\_\_\_ Dissolution / Withdrawal Annual Report / Reinstatement\_\_\_\_\_ Cert. Copy\_\_\_\_\_ Photo Copy\_\_\_\_\_ Certificate of Good Standing Certificate of Status Certificate of Fictitious Name\_\_\_\_\_\_ Corp Record Search\_\_\_\_\_ Officer Search\_\_\_\_\_ Fictitious Search Fictitious Owner Search\_\_\_\_\_ Signature Vehicle Search\_\_\_\_\_ Driving Record\_\_\_\_\_ UCC 1 or 3 File Requested by: UCC 11 Search \_\_\_\_\_ Name UCC 11 Retrieval\_\_\_\_\_ Will Pick Up Walk-In Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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SECURITY OF STATES STATES

The name of the Limited Liability Company is:  H. B. TRIM, LLC	
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4229 NWAS RO STREET, #54	4229 NW 43 STREET #54
GAINESVILLE, FL 32609	GAINESVILLE, FL 32609
	,

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

HUBERT J. BOUCHER

Name

H229 NW 43 PD STREET #54

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

GAINES VILLE FLORIDA 3 2-609

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

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" - Manager Name and Address: "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.) Typed or printed name of signee Filing Fast: \$190,00 Filing Fee for Articles of Organization \$ 35.00 Designation of Registered Agent

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)