

L04 000024757

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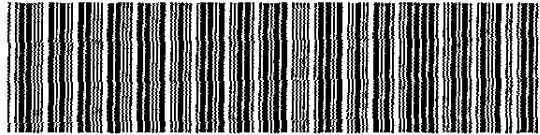
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APR 21 2004
FBI - JEFFERSON

04 APR - 1 PM 2:34



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 27, 2004

HAROLD JOHNSTON
7429 W WATSON ST
INVERNESS, FL 34450

SUBJECT: HAROLD JOHNSTONS TRIM, INC.
Ref. Number: W04000003363

RECEIVED
TALLAHASSEE, FL
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We have received your document for HAROLD JOHNSTONS TRIM, INC. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

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 call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 304A00005340

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I - Name:

The name of the Limited Liability Company is:

Harold Johnstons Trim, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

7429, W. Watson St

7429 W. Watson St

Inverness, Fl 34450

Inverness, Fl 34450

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

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

Maria Duteau

Name

916, US Hwy. 41 S.

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

Inverness, Fl 34450 FLORIDA

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

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

Harold R. Johnston

7429. W. Watson St

Inverness, FL 34450

(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 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)