Division of Corporation

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Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305) 634-3694

Phone

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

I'VE GOT WOOD, LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

Electronic Filing Menu.

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ARTICLES OF ORGANIZATION FOR I'VE GOT WOOD, LLC

ARTICLE I - NAME: The name of the Limited Liability Company is I'VE GOT WOOD. LLC.

ARTICLE II - ADDRESS: The mailing address and the street address of the principal office of the Limited Liability Company is

> 10363 186TH Ct. S. Boca Raton, Florida 33498

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE: The name and Florida street address of the registered agent is:

> Joshua Miller 10363 186th Ct. S. Boca Raton, Florida 33498

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, F.S.

ARTICLE IV - MANAGEMENT: The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company. The name and address of the person who shall serve as such shall be as follows:

Joshua Miller

10363 186th Ct. S. Boca Raton, Florida 33498

(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.

> oshoa Miller Typed or Printed name of signee

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