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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : SAVAGE, KRIM, SIMONS & JONES, LLC

Account Number: 073617000267 Phone: (352)732-8944

Fax Number : (352) 867-0504

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VISION OF CORPORATIN

LIMITED LIABILITY COMPANY

Central Florida Welding, LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION

of

2004 APR 27 A 10: 49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CENTRAL FLORIDA WELDING, LLC a Florida Limited Liability Company

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be CENTRAL FLORIDA WELDING, LLC ("Company").

ARTICLE II - ADDRESS

The address of the principal office of the company shall be 945 NW 17th Ave., Ocala Florida 34475.

ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent and registered office of the Company in the state of Florida is John S. Simons, Esq., 121 NW Third Street, Ocala, FL 34475.

Signed this 27th day of April, 2003.

JOHN S SIMONS, Organizer and

Authorized Representative of the Members

STATE OF FLORIDA COUNTY OF MARION

The foregoing instrument was acknowledged before me this 27th day of April, 2004, by JOHN S. SIMONS, as Organizer and Authorized Representative of the Members, who is personally

known to me.

Angala M. Priest
Expires: April 24, 2005
Western Surety Company
Commission #DD803278

Notary Public, State of Florida

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ACCEPTANCE OF REGISTERED AGENT

for

2001 APR 27 A 10: 49

CENTRAL FLORIDA WELDING, LLC

a Florida Limited Liability Company

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Undersigned hereby states that he is familiar with the obligations of Registered Agent for the Company as provided by Chapter 608, Florida Statutes, and accepts the appointment as Registered Agent for the Company.

Signed this 27th day of April, 2004.

JOHN'S. SIMONS, Registered Agent

STATE OF FLORIDA COUNTY OF MARION

The foregoing instrument was acknowledged before me this 27th day of April, 2004, by IOHN S. SIMONS, as Registered Agent, who is personally known to me.

Angela M. Priest Expires: April 24, 2005
Western Surety Company
Commission #0D003270

Notary Public, State of Florida

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