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(1	Requestor's Name)	
	Address)	
(/	Address)	····
(0	City/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·
PICK-UP	WAIT	MAIL
(F	Business Entity Name)	
(1)	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
	Office Use Only	·



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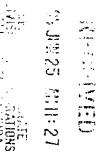
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\ CORPORATE \			
ACCESS,	236 East 6th Ave	nue . Tallahassee, Florida 32303	120. P. 10.
INC. P.O. Bo	эх 37066 (32315-7066)	enue - Tallahassee, Florida 32303 (850) 222-2666 or (800) 969-1	666 Tex (850) 222-1666
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CERTIFIED COPY		cus	
РИОТО СОРУ		VFILING L	
L) A AROS (CORPORATE NAME & DOCUMENT #)	supply (Congony, L	C PHID: 25
2.)(CORPORATE NAME & DOCUMENT#)			
(CORPORATE NAME & DOCUMENT#)			
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5.) (CORPORATE NAME & DOCUMENT#)			
SPECIAL INSTRUCTIONS			
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:

	-			
AAron	Supply	Company,	, uc	
ARTICLE II - Add The mailing address		ess of the principal	office of the Limited Liability Comp	any is
Principal Office A	ddress:		Mailing Address:	

Principal Office Address:	Manue Address.
828 E EAU GAllie Blud	828 E FAU GANTEBLUD
Indian Harbour Beach	Indian Harbour Beach
FL 32937	FL 32937

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

Sames E. Greene
Name

513 Australian (3 NW)

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

PAlm Bay FLORIDA 32907

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 "MGRM" = Managing Member	Name and Address:	
MGRM	James E Greene 573 Australian of NW PHM BAY FL 32907	
MGR	ANDREWK.DALN 631 HIBISEUS DR. SATELLIZE BEACH, FL 32.93	
(Use attachment if necessary)		
NOTE: An additional article must be REQUIRED SIGNATURE:	added if an effective date is requested.	
\	ithorized representative of a member.	
(In accordance with section 608.4	408(3), Florida Statutes, the execution firmation under the penalties of perjury	
James F C Typed or prin	orche nted 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)