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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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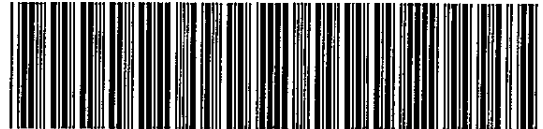
(Business Entity Name)

(Document Number)

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COVER LETTER

TOBY SAULS

13852 PINE VILLA LANE

FT. MYERS FL. 33912

work 239-432-0504

Home 239-481-8853

SOLE PROPRIETOR OF:

FLORIDA ALUMINUM AND SCREEN ~~LLC~~

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Aluminum and Screen LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Toby S. Sauls
(Name of Person)

Florida Aluminum and Screen LLC
(Firm/Company)

13852 Pine Villa Lane
(Address)

Fort Myers, FL 33912
(City/State and Zip Code)

For further information concerning this matter, please call:

Toby S. Sauls at (239) 432-0504
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Florida Aluminum and Screen LLC

ARTICLE II - Address:

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

Principal Office Address:

Florida Aluminum and Screen LLC

13852 Pine Villa Lane

Fort Myers, FL 33912

Mailing Address:

Florida Aluminum and Screen LLC

13852 Pine Villa Lane

Fort Myers, FL 33912

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

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

Toby S. Sauls

Name

13852 Pine Villa Lane

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

Fort Myers, FL 33912

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:

MGRM

Toby S. Sauls


13852 Pine Villa Lane

Fort Myers, FL 33912

(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.)

Toby S. Sauls

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)