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LIMITED LIABILITY COMPANY

Threads N Logos LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION OF Threads N Logos LLC

ARTICLE 1 . NAME

The name of the limited liability company shall be: Threads N Logos LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 2852 SW Fluvia St., Port Saint Lucie, Florida 34953.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Kendra Bowen, 2852 SW Fluvia St., Port Saint Lucie, Florida 34953. Located in the County of St. Lucie.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2044.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the members of the Limited Liability Company are:

Douglas Titman, 2852 SW Fluvia St., Port Saint Lucie, Florida 34953

Kendra Bowen, 2852 SW Fluvia St., Port Saint Lucie, Florida 34953

Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,

Madison, WI 53717

(608) 827-5300

FAX AUDIT # 154000 2044433

CCT 13 111 5:

· CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Threads N Logos LLC

The name and address of the registered agent and office is: Kendra Bowen, 2852 SW Fhrvia St., Port Saint Lucie, Florida 34953. Located in the County of St. Lucie.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature >

Kendra Bowen

Date: August 25, 2004

HOU 800 2644433