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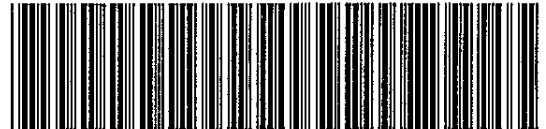
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ATTORNEYS AT LAW  
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October 19, 2004

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

RE: Organization of L. M. Smith Home Repairs, L.L.C.

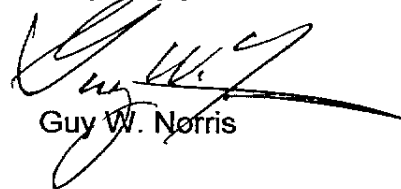
Gentlepersons:

Enclosed for filing are original and one copy of Articles of Organization of L. M. Smith Home Repairs, L.L.C., together with this firm's check in the amount of \$155.00 which represents \$100.00 for the filing fee, \$25.00 for Designation of Registered Agent and \$30.00 for a certified copy.

Please return the certified copy to this office.

Should you have any questions or comments regarding the foregoing, please do not hesitate to contact me. Thank you for your courtesy.

Very truly yours,



Guy W. Norris

GWN:sfb  
Enclosures

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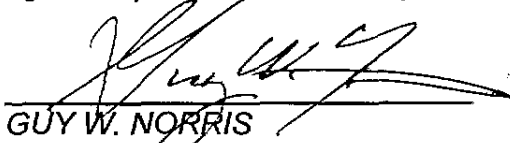
ARTICLES OF ORGANIZATION  
L. M. SMITH HOME REPAIRS, L.L.C.  
A LIMITED LIABILITY COMPANY  
(Pursuant to Chapter 608, Florida Statutes)


1. **Name.** The name of the limited liability company is L. M. SMITH HOME REPAIRS, L.L.C.
2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:  
  
233 S. W. Covey Court, Lake City, Florida 32025
4. **Mailing Address.** The mailing address of the limited liability company is:  
  
233 S. W. Covey Court, Lake City, Florida 32025
5. **Members at Time of Formation.** There will be at least one member at the time the limited liability company is formed.
6. **Period of Duration.** The period of duration shall be perpetual.
7. **Management.** The limited liability company is to be managed by one or more managers and is, therefore, a manager - managed company.
8. **Effective Date.** The effective date of the limited liability company shall be the date and time of filing.

9. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida Street address of the registered agent are:

GUY W. NORRIS  
NORRIS & JOHNSON, P.A.  
253 N.W. Main Boulevard  
Lake City, FL 32055

*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.*

  
GUY W. NORRIS

  
Lynn M. Smith  
Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)