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**LIMITED LIABILITY COMPANY**  
**HOME DOCTORS CARPENTRY, LLC**

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

**ARTICLE I**

**Name and Address**

The name of this Limited Liability Company is:

**HOME DOCTORS CARPENTRY, LLC**

The mailing address and street address of the Limited Liability Company are :

**1134 Ruby Street  
Lakeland, FL 33815**

**ARTICLE II**

**Term of Existence**

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

**ARTICLE III**

**Purpose and Powers**

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

**ARTICLE IV**

**Powers**

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

SECRETARY OF STATE  
ALAHASSE, FLORIDA

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This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3249 W Cypress St., Suite C. Tampa, FL 33607, (813)-875-1333.

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**ARTICLE V**  
**Initial Registered Office and Agent**

The street address of the initial registered office of this Limited Liability Company is:

**1134 Ruby Street  
Lakeland, FL 33815**

and the name of its registered agent at such address is:

**Mark McKittrick**

**ARTICLE VI**  
**Management**

This Limited Liability Company shall have Two Manager(s) or Managing Member(s).  
The name and address of Manager(s) or Managing Member(s) are:

**Name and Address**

**Mark McKittrick, Managing Member  
1134 Ruby Street  
Lakeland, FL 33815**

**Angela McKittrick, Managing Member  
1134 Ruby Street  
Lakeland, FL 33815**

Dated: Monday, January 24, 2005

  
Mark McKittrick

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**ACCEPTANCE BY REGISTERED AGENT**

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.

Date: January 24, 2005

Mark McKittrick  
Mark McKittrick

SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

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