

Florida Department of State
Division of Corporations
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(((H05000079072 3)))

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To:

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Fax Number : (850) 205-0383

From:

Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.
Account Number : 075410002172
Phone : (239) 334-4121
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LIMITED LIABILITY COMPANY

GLASS TILE SOURCE, LLC

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION
OF
GLASS TILE SOURCE, LLC**

ARTICLE I-NAME

The name of the limited liability company shall be GLASS TILE SOURCE, LLC (the "Company").

ARTICLE II- STREET AND MAILING ADDRESS

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

11950 Amedicus Lane, Unit 110
Fort Myers, Florida 33907

ARTICLE III-EFFECTIVE DATE

This limited liability company's existence shall commence upon the filing of these Articles and shall terminate as provided for in the Operating Agreement.

ARTICLE IV-INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company is:

Name

Address

PETER A. TSCHERNITZ

11950 Amedicus Lane, Unit 110
Fort Myers, Florida 33907

ARTICLE V-PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

ARTICLE VI-MANAGEMENT OF THE COMPANY

The management of the Company is reserved to the Members and is, therefore, a member-managed company.

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ARTICLE VII-OPERATING AGREEMENT

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned, being a Member of the Company, has executed these Articles of Organization this 31st day of March, 2005.



PETER A. TSCHERNITZ, Member

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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

1. The name of the limited liability company is: GLASS TILE SOURCE, LLC.
2. The name and address of the registered agent and office is:

Peter A. Tschernitz
11950 Amedicus Lane, Unit 110
Fort Myers, Florida 33907

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.


PETER A. TSCHERNITZ
Registered Agent

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