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(Re	equestor's Name)	
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	ty/State/Zip/Phone	#
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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05 JUN 20 PH 3: 12
SECRETARY OF STATE
TALL ANASSES FLORIO

TRANSMITTAL LETTER

TO: Registration Section Division of Corporation	ns				
SUBJECT: Glass Fusion of					
	(Name of Limited	Liability Company)			
The enclosed Articles of Organi					
David R. Evans					
<u> </u>	(Na	ime of Person)			
Husch & Eppenberger, LLC	;				
		irm/Company)			
736 Georgia Aven	ue, Suite 300		-	·	
		(Address)		SECRET ALLAH	TIL TIL
Chattanoog	a, TN 37402			SSA))
	(City/S	tate and Zip Code)		E OF	모 [
For further information concern	ning this matter, please c	all:		S TATE FLORIC	PH 3: 12
David R. Evans	•	At (423 755-2643 (Area Code & Daytime Te		Ď	
(Name of Perso		(Area Code & Daytime Te	lephone Number)		
Enclosed is a check for the f	ollowing amount:				
	130.00 Filing Fee & ificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 F Certificate of Certified Co (additional copy	f Status & opy	
STREET AI	DDRESS:	MAILING A	DDRESS:		

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	s;
Glass Fusion of Florida, LLC	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
314 Forrest Crest Court	314 Forrest Crest Court
Ocoee, Florida 34761	Ocoee, Florida 34761
Melissa L. Grantier Nan 314 Forrest Crest Court Florida street a	ne Address (P.O. Box NOT acceptable) HETARY OF STATION STATI
Осоее	
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:		
"MGR" = Manag				
"MGRM" = Mar	naging Member			
MGRM		MG Distribution Inc.		
		6 Brookland Drive		
		Cartersville, Georgia 30120		돧
				-
				
				:
				
(Uga ettechment	:6	TA'S	, <u>g</u>	
(Use attachment	ii necessary)		<u>ح</u> ي	CHANGE
NOTE: An add	litional article must be :	added if an effective date is requested.	05 JUN 20	27.70
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REQUIRED SI	GNATURE:	m. m	P4	
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	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 that the facts stated herein	s an affirmation under the penalties of perjury		
		,		
	Typed	or printed name of signee		
		- -		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)