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Florida Department of State

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LIMITED LIABILITY COMPANY

Jackson Drywall, L.L.C.

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

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FAX AUDIT # HOSOOO1753193

ARTICLES OF ORGANIZATION OF Jackson Drywall, L.L.C.

ARTICLE I

NAME

The name of the limited liability company shall be: Jackson Drywall, L.L.C.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 4290 Railroad St., Pace, Florida 32571.

ARTICLE III I

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Doug Jackson, 4290 Railroad St., Pace, Florida 32571. Located in the County of Santa Rosa.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2045.

ARTICLE V MANAGERS/MEMBERS

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

Doug Jackson, 4290 Railroad St., Pace, Florida 32571 Stan Jackson, 4290 Railroad St., Pace, Florida 32571

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

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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: Jackson Drywall, L.L.C.

The name and address of the registered agent and office is Doug Jackson, 4290 Railroad St., Pace, Florida 32571. Located in the County of Santa Rosa.

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: Doug ficker

Date: July 14, 2005

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