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TALLAHASSEE, FLORIDA

4. BRYAN JUL 29 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANDRES CABINETRY & TRIM, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHEILA STRINGER
(Name of Person)

ANDRES CABINETRY & TRIM, LLC
(Firm/Company)

755 Grand Blvd. B105-208
(Address)

Miramar Beach, FL 32550
(City/State and Zip Code)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

SHEILA STRINGER at (850) 267-1400
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

MAILING ADDRESS:
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 is:

ANDRES CABINETRY & TRIM, LLC

ARTICLE II - Address:

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

Principal Office Address:

755 Grand Blvd.
B105-208
Miramar Beach, FL 32550

Mailing Address:

755 Grand Blvd.
B105-208
Miramar Beach, FL 32550

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

AMANDA PEREZ

Name

220 Hwy 393 N.

Florida street address (P.O. Box NOT acceptable)

Santa Rosa Beach, FL 32459

City, State, and Zip

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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..


Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

ANDRES ESTRADA

755 Grand Blvd. B105-208

Miramar Beach, FL 32550

MGRM

North American Information Technology, LLC

10859 Emerald Coast Pkwy #4-307

Miramar Beach, FL 32550

MGRM

Liberty Legal Research, LLC

755 Grand Blvd. B105-173

Miramar Beach, FL 32550

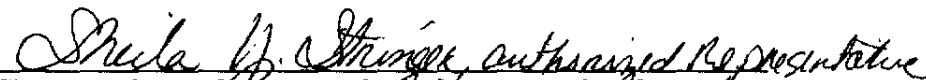
XXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXX

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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 an affirmation under the penalties of perjury that the facts stated herein are true.)

SHEILA STRINGER, AUTHORIZED REPRESENTATIVE

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)