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SECRETARY OF STATE TALLAHASSEE. FLORIDA

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LIMITED LIABILITY COMPANY

R.W. Furniture & Millworks LLC

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ARTICLES OF ORGANIZATION FOR

FILED

46

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Limited Liability Company is:	R.W. FURNITURE & MILLWORKSELC A II:
ARTICLE II - Address The mailing address and street address of the pri	SECRETARY OF STA TALLAHASSEE, FLOR ncipal office of the Limited Lizbility Company is:
Principal Office Address:	Mailing Address:
220 Bay Street	220 Bay Street
Green Cove Springs, FL 32043	Green Cove Springs, FL 32043
The name and Florida street address of the regis	gistered Office & Registered Agent's Signature tered agent are: andy D. West
22	O Bay Street
G	(P.O. Box or Mail Drop Box <u>NOT</u> Acceptable) reen Cove Springs, FL 32043 (City / State / Zip)
u the place designated in this certificate, I he sapacity. I further agree to comply with the p	to accept service of process for the above stated limited liability company ereby accept the appointment as registered agent and agree to act in this provisions of all statutes relating to the proper and complete performance ept the obligations of my position as registered agent as provided for in

Regisfered Agent's Signature - Randy D. West

ARTICLE IV - Manager(s) or Managing Member(s): H05000276772 The name and address of each Manager or Managing Member is as follows: FILED Name and Address: <u>Title:</u> "MGR" = Manager 2005 DEC -2 A 11: 46 "MGRM" = Managing Member MGRM Randy D. West -220 Bay Street, Green Cove Springs, MGRM Alma M. West -220 Bay Street, Green Cove Springs, FL 32043 (Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member of 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.)

Randy D. West

Typed or printed name of signee