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LIMITED LIABILITY COMPANY

Tropic Fasteners, LLC

Certificate of Status	1
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**ARTICLES OF ORGANIZATION
OF
TROPIC FASTENERS, LLC**

ARTICLE I

Name and Duration

The name of this Limited Liability Company is TROPIC FASTENERS, LLC (hereinafter referred to as the "Company"). The duration of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE II

Principal Office

The mailing address and street address of the principal office of the Company is 255 Semoran Commerce Place, Suite 101, Apopka, Florida 32703, or such other place as the members of the Company may determine from time to time.

ARTICLE III

Registered Office and Agent

The address of the registered office of the Company in the State of Florida is 255 Semoran Commerce Place, Suite 101, Apopka, Florida 32703. The name of the registered agent at such address is Judy L. Watson.

DATED as of the 7 day of December 2005.


Judy L. Watson, authorized person

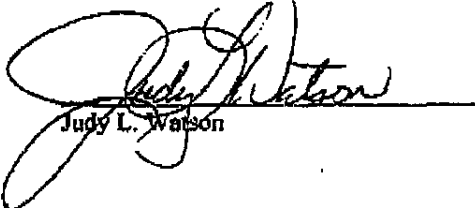
CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Florida Statute Section 608.415, TROPIC FASTENERS, LLC 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 TROPIC FASTENERS, LLC.
2. The name and address of the registered agent and office is: Judy L. Watson, 255 Semoran Commerce Place, Suite 101, Apopka, Florida 32703.

Having been named as registered agent and to accept service of process for the above-named limited liability company at the place designated in this certificate, the undersigned, hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of the position as registered agent.

Dated: December 7, 2005.


Judy L. Watson

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