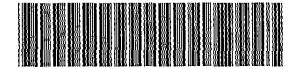
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SALLAHASSEE FLORIDA

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### COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: PELLA INTERNATIONAL, 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: MARINA IVANOVA (Name of Person) CORPORATE CLUB USA SERVICES CORP. (Firm/Company) 596 ANDERSON AVENUE, SUITE 206 (Address) CLIFFSIDE PARK, NJ 07010 (City/State and Zip Code) For further information concerning this matter, please call: MARINA IVANOVA (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: \$125.00 Filing Fee \$\int \$130.00 Filing Fee & ☑ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address

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

Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## PELLA INTERNATIONAL, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

#### **ARTICLE II - Address:**

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

#### Principal Office Address:

Mailing Address:

16711 COLLINS AVENUE, SUITE 2403 SUNNY ISLES BEACH, FL 33160 16711 COLLINS AVENUE, SUITE 2403 SUNNY ISLES BEACH, FL 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual of another

business entity with an active Florida registration.)

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

FRANK CORN

Name

16711 COLLINS AVENUE, SUITE 2403

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

SUNNY ISLES BEACH

FL 33160

City, State, and Zip

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 (REQUIREL

(CONTINUED)
Page 1 of 2

# 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" = Manager "MGRM" = Managing Member MGR FRANK CORN 18711 COLLINS AVENUE, SUITE 2403 SUNNY ISLES BEACH, FL 33160 MGRM DAVID SCHVARTSMAN 16711 COLLINS AVENUE, SUITE 2403 SUNNY ISLES BEACH, FL 33160 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: UPON FILING . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member of an authorized representative of a member.

Filing Fees:

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

FRANK CORN

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee