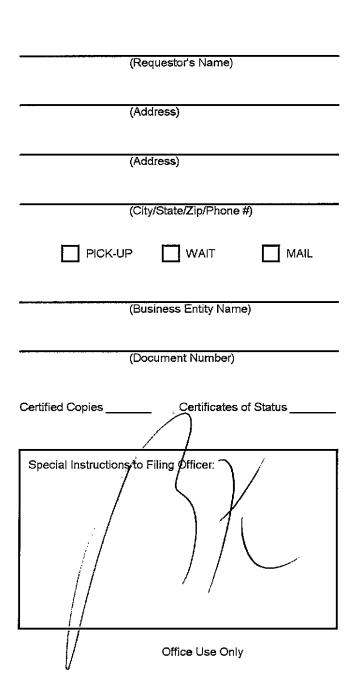
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## CAPITAL CONNECTION, INC.

**417** E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Barryo Blinds, UC	
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	Art of Inc. File CO. LTD Partnership File SW.
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
1	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

## ARTICLES OF ORGANIZATION OF BARRY'S BLINDS, LLC

THE RESERVENCE OF THE PARTY OF The undersigned, being a natural person of at least 18 years of age and acting as the Organizer of the Limited Liability Company hereby being formed under the Chapter 608 of the Elorida Statutes, does hereby adopt the following Articles of Organization for the Limited Liability Company: \*\*

FIRST: The name of the Limited Liability Company is:

Barry's Blinds, LLC

SECOND: The Limited Liability Company shall continue until the occurrence of an event set forth in the Operating Agreement which causes the termination of the Limited Liability Company.

THIRD: The Limited Liability Company is organized to engage in and do any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company may be organized in accordance with the Chapter 608 of the Florida Statutes, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FOURTH: The mailing address and street address of the initial registered office of the Limited Liability Company in Florida is 510 Shadow Wood Lane, Coral Springs, FL 33071, and the name of the initial registered agent of the Limited Liability Company in Florida at that address is Barry Berman.

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.

FIFTH: The mailing address and principal office of the Limited Liability Company is 510 Shadow Wood Lane, Coral Springs, FL 33071

SIXTH: The Limited Liability Company will be operated by the Members, each of whom is designated a Managing Member (MGRM), and no manager will be appointed. The names and addresses of the Members are:

> Barry Berman 510 Shadow Wood Lane Coral Springs, FL 33071

> > and

Sandra Berman 510 Shadow Wood Lane Coral Springs, FL 33071.

SEVENTH: The existing Members shall have the right to admit additional Members to the Limited Liability Company, by the unanimous vote or consent of the Members.

EIGHTH: The remaining Members of the Limited Liability Company, by the unanimous vote or consent of the Members (other than the Member who caused the Withdrawal Event), may continue the Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a Member in the Limited Liability Company.

NINTH: The name and business address of the Organizer of the Limited Liability Company is: Barry Berman, 510 Shadow Wood Lane, Coral Springs, FL 33071.

**IN WITNESS WHEREOF**, the undersigned has executed and acknowledged these Articles of Organization on January  $\underline{/6}$ , 2006.

Barry Berman Organizer