

JAN-26-06 10:27

From AKERMAN SENTERFITT

3052745095

FILED 01/26/06 Job-450

Page 1 of 1

Division of Corporations

Florida Department of State
Division of Corporations
Public Access System

2006 JAN 26 A 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000022575 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From Jazmine Roman

Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

RECEIVED
06 JAN 26 PM 3:25
DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Scandinavian Tile & Drywall LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

2006 JAN 26 A 9:21
H06000022575 3

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SCANDINAVIAN TILE & DRYWALL 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:

530 W 27 ST
HALEAH FL 33130

Mailing Address:

530 W 27 ST
HALEAH FL 33130

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 or another business entity with an active Florida registration.)

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

DAVID BILLSKOOB
Name

530 W 27 ST
Florida street address (P.O. Box NOT acceptable)

HALEAH FL 33130
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.

David BillskooB
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H06000022575 3

FILED

H06000022575 3
2006 JAN 26 A 9:21

ARTICLE IV- Manager(s) or Managing Member(s): SECRETARY OF STATE
The name and address of each Manager or Managing Member is as follows: TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Name and Address:

DAVID BILLSKROOG
530 W 22 ST
HIACLEAH FL 33130

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of 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:

David Billskroog
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.)

DAVID BILLSKROOG
Typed or printed name of signer

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)

H06000022575 3