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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)	
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	(Document Number)	
Special Instructions to Filing Officer:	Certified Copies Certificates of Status	
	Special Instructions to Filing Officer:	



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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

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Roof Tila	e Replication 2	LC	
			EFFICING DATE 222 OF 22
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
		/	L.C. File
		1	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
~-8			Vehicle Search
			Driving Record
Requested by:			UCC 1 or 3 File
Name WL			UCC 11 Search
11dille	Date Title		UCC 11 Retrieval
Walk-In	Will Pick Up		Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of the Limited Liability Company is:

ROOF TILE REPLICATION, L.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:

8401 J.R. Manor Dr., Ste. 100 Tampa, FL 33634-1400 8401 J.R. Manor Dr., Ste. 100 Tampa, FL 33634-1400

SERVICE TO SERVICE TO

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

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

J.R. Epperson, Esquire				
Name				
8401 J.R. Manor Dr., Ste. 100				
Florida street address (P.O. Box NOT acceptable)				
Tampa, FL 33634-1400				
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.

egistered Agent's Signature

(CONTINUED)

The name and address of each Manager or l	Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Joel R. Epperson
	8401 J.R. Manor Dr., Ste. 100
·	Tampa, FL 33634-1400
•	
(Use attachment if necessary)	
ARTICLE V - effective date	
The effective date for this limited liability c	company shall be:
Febr	ruary 22, 2006
W17 5	RED SIGNATURE:
(In accordance with section 608,408(3)	authorized representative of a member), Florida Statutes, the execution of this document lities of perjury that the facts stated herein are true.)

Joel R. Epperson
Typed or printed name of signee

ARTICLE IV - Manager(s) or Managing Member(s):