

Florida Department of State Division of Corporations 2006 MAR 23 A 9: 19
SECRETARY OF STATE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC. Account Number : 120010000247

Account Number : 120010000247 Phone : (800)494-3124 Fax Number : (305)675-2811

FLORIDA/FOREIGN LIMITED LIABILITY CO.

BLACKWOOD SALES LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITEDALIABILITYATE COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: BLACKWOOD SALES LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 3150 DUNCAN RD

PUNTA GORDA FL 33982

ARTICLE III REGISTERED AGENT. REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are: A1A REGISTERED AGENT INC.

92 SADBERRY ROAD QUINCY FL 32351

Having been named as registered agent 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..

M & J & L

A1A REGISTERED AGENT INC./ Registered Agent's Signature

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H06000077599 3

PAGE 2

BLACKWOOD SALES HE GAR 23 A 9: 19

ARTICLE IV MANAGEMENT

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The Limited Liability Company is to be managed by one members and is, therefore, a Member-Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER LESLIE A. RISHER 2255 DONGOLA ST NORTH PORT FL 34286

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.

NAME OF SIGNER LESLIE A. RISHER Typed or printed name of signee