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FLØRIDA/FOREIGN LIMITED LIABILITY CO.

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TOOL ~ TIME L.L.C.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

. . .

The name of the Limited Liability Company is: TOOL ~ TIME 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:

4380 SE 56 Lane

4380 SE 56 Lane

Mailing Address:

Ocala, FL 34480

Ocala, FL 34480_____

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature The name and Florida street address of the registered agent are:

Thomas J. Potts	Σœ	1 0 0	
Name	LAR	ΜΑΥ	_
4380 SE 56 Lane	TAR) ASSI	ယ	FILT
(P.O. Box or Mail Drop Box NOT Acceptable)		A	9
Ocala, FL 34480	LOF	=	
(City / State / Zip)	BA	5	

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 - Thomas J. Potts

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	
"MGR" =	Manager
"MGRM"	= Managing Member

Name and Address:

MGRM

Thomas J. Potts- 4380 SE 56 Lane, Ocala, FL 34480

(Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member of authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)

Thomas J. Potts

Typed or printed name of signee

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