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To:

Division of Corporations

Fax Number : (850) 205-0383

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 Phone (800) 494-3124 Fax Number (305) 675-2811

LORIDA/FOREIGN LIMITED LIABILITY CO.

TRY R.B. DRYWALL, LLC

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Page Count	02
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Electronic Filing Menu

Corporate Filing Menu

Help

1 of 1

7/14/2006 3:00 PM

H06000180533 3

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company Is:

TRY R.B. DRYWALL, LLC

ARTICLE II ADDRESS

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

19 CLYDESDALE DR ORMOND BEACH FL 32174-1428

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

ROBERT BAILLARGEON
19 CLYDESDALE DR
ORMOND BEACH FL 32174-1428

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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agen: as provided for in Chapter 608, F.S..

ROBERT BAILLARGEON/ Registered Agent's Signature

<u>ARTICLE IV MANAGEMENT</u>

The Limited Liability Company will be managed by one or more managing menibers and is, therefore, a Member Managed Company.

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PAGE 2 TRY R.B. DRYWALL, LLC

ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

ROBERT BAILLARGEON MANAGING MEMBER: 19 CLYDESDALE DR

ORMOND BEACH FL 32174-1428

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.)

ROBERT BAILLARGEON
Typed or printed name of signee

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