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LÔRIDA/FOREIGN LIMITED LIABILITY CO.

Powers Trim LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name		The state of the s
The name of the Limited Liability Comp	pany is: Powers Trim LLC	2006 JUL 21 A 10: 43
ARTICLE II - Address The mailing address and street address of	of the principal office of the Limited Liability Cor	SECRETARY OF STATE mpanyfisLLAHASSEE. FLORIDA
Principal Office Address:	Mailing Address:	
214-A San Vincente Street	214-A San Vincente	Street
Panama City Beach, FL 32413	Panama City Beach,	FL 32413
ARTICLE III - Registered Age The name and Florida street address of	ent, Registered Office & Registered Age the registered agent are: Jason Powers	ent's Signature
	Name	4
	214-A San Vincente Street	
	(P.O. Box or Mail Drop Box NOT Acceptal	e)
	Panama City Beach, FL 32413	
	(City / State / Zip)	
at the place designated in this certific capacity. I further agree to comply w	ent and to accept service of process for the abcate, I hereby accept the appointment as regisfith the provisions of all statutes relating to thand accept the obligations of my position as r	stered agent and agree to act in this e proper and complete performance
•	Ogran A Paris	
	Registered Agent's Signature - Jason Power	9
· -	Breeze Grand Grand Carrest Ca	

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ARTICLE IV - Manager(s) o	- · · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,
The name and address of each Ma	nager or Managing Member is as follows:	
<u>Title:</u> "MGR" = Manager	Name and Address:	FILED
"MGRM" = Managing Member		2006 JUL 21 A 10: 43
MGRM	Jason Powers-214-A San Vincente S	Street, Panana City Beach, FL 32413
MGRM	Stacey Powers-214-A San Vincente	TALLAHASSEE, FLORIDA Street, Panama City Beach, FL 32413
(Use attachment if necessary)		
(Ose attachment in necessary)	•	
REQUIRED SIGNATURE:		
Signatuj	ason A Power or authorized representati	
document	ance with section 608.408(3), Florida Stat constitutes an affirmation under the penal in are true.)	
	Jason Powers	
	Typed or printed name of signs	86