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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

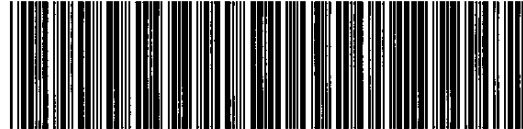
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X-Treme Decorative Coatings, LLC

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___ Art of Inc. File ___
___ LTD Partnership File ___
___ Foreign Corp. File ___
___ L.C. File ___
___ Fictitious Name File ___
___ Trade/Service Mark ___
___ Merger File ___
___ Art. of Amend. File ___
___ RA Resignation ___
___ Dissolution / Withdrawal ___
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___ Cert. Copy ___
___ Photo Copy ___
___ Certificate of Good Standing ___
___ Certificate of Status ___
___ Certificate of Fictitious Name ___
___ Corp Record Search ___
___ Officer Search ___
___ Fictitious Search ___
___ Fictitious Owner Search ___
___ Vehicle Search ___
___ Driving Record ___
___ UCC 1 or 3 File ___
___ UCC 11 Search ___
___ UCC 11 Retrieval ___
___ Courier ___

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

**ARTICLES OF ORGANIZATION OF
X-TREME DECORATIVE COATINGS, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, hereby adopts the following Articles of Organization:

ARTICLE I - Name:

The name of the Limited Liability Company is **X-TREME DECORATIVE COATINGS, LLC.**

ARTICLE II - Address:

The mailing address of the Limited Liability Company is:

6941 Alken Circle
New Port Richey, Florida 34653

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

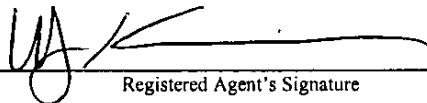
6941 Alken Circle
New Port Richey, Florida 34653

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

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

WILLIAM J. KING.
6941 Alken Circle
New Port Richey, Florida 34653

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

ARTICLE IV - Management (Check box if applicable):

☐ The Limited Liability Company is to be managed by one manager and is, therefore, a manager - managed company. The name and address of the manager are:

WILLIAM J. KING.
6941 Alken Circle
New Port Richey, Florida 34653

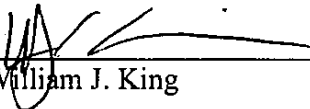
ARTICLE V — Limitation on Agency Authority of Members:

Pursuant to Section 608.4235 of the Florida Limited Liability Company Act, no member of the Limited Liability Company shall be an agent of the Company solely by virtue of being a member, and no member shall have authority to incur debt or contractual liability on behalf of the Company solely by virtue of being a member.

ARTICLE VI — Indemnification:

Pursuant to 608.4229, the Limited Liability Company shall have the power to indemnify any member or manager, or any former member or manager, to the full extent permitted by law from and against any and all claims whatsoever.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 15 day of November, 2006.



William J. King

(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.)

STATE OF FLORIDA

)

) ss:

COUNTY OF PINELLAS

)

The foregoing instrument was acknowledged before me this 15 day of November, 2006, by William J. King.



Notary Public Name: Melissa H. Nelson
State of Florida at Large
My commission expires:

Personally known: _____ **OR** Produced I.D.: X

Type of Identification Produced: FL Drivers License