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SECRETARY OF STATE DIVISION OF CORPORATIONS OF PHILE: 12

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COVÉR LETTER

TO:	Registration Se Division of Co					
	. Zimme	rman's Quality Carpe	ntry & Wood	lworking	ПС	•
SUBJ	ECT: Zimine	<u> </u>	ed Liability Comp		LLO	_
The e	nclosed Articles o	of Organization and fee(s) are s	submitted for filin	α		
		*		_		
Please	e return all corresp	ondence concerning this matte	er to the following	<u>}.</u>		
			y J Zimmern	nan		
		((Name of Person)			
	Zi	mmerman's Quality	Carpentry 8	k Woodw	orking , LLC	
			(Firm/Company)			
		104 F	Pioneer Trai	il		55
			(Address)			OT WES
		Green Cove Sp	rinas. Flori	da 3204	3	新麗
			/State and Zip Code			- 22 FAR
						2 P
For fu	rther information	concerning this matter, please	call:			22 PH 12: 12
	Nancie Zim	nmerman	at (386	326-376	8	SECRE IARY OF ORATIONS OT MAR 22 PH 12: 12
	(Name	of Person)		e & Daytime T	elephone Number)	
Enclo	sed is a check for	or the following amount:				
\$12	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy)	у	\$160.00 Filing Certificate of State Certified Copy (additional copy is en	itus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporation duilding	ns Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	pany is:
Zimmerman's Quality Caro	entry & Woodworking , LLC
	ny, "Limited Company" or their abbreviation "LLC," or "L.C.,")
	T ISO
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
104 Pioneer Trail	104 Pioneer Trail
Green Cove Springs, Florida 32043	Green Cove Springs, Florida 32043
business entity with an active Florida registration.) The name and the Florida street address Timothy	J Zimmerman 03 19 07
	Name
104 (Pioneer Trail
Florida	street address (P.O. Box NOT acceptable)
Green Cove	Springs, FL 32043
	y, State, and Zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and com	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S
& pinchy	Zundr —
Registered Agen	Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

"MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
Manager	Timothy J Zimmerman	
	104 Pioneer Trail	_
	Green Cove Springs, Florida 32043	- - :
Managing Member	Nancie U Zimmerman	ci ci
	104 Pioneer Trail	
	Green Cove Springs, Florida 32043	S CS
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(Use attachment if necessary)		
TICLE V. Effective data if other than	the date of filing: March 19 2007 (OPTIO	ONIAI)
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)