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p.o. box 495 dexter, mi 48130

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

January 26, 2009

Re: International Glass & Design, LLC

Dear Sir or Madam:

Enitia Corporation has been authorized by Thomas P. O\'Connell to file the enclosed Articles for International Glass & Design, LLC. Enitia Corporation is acting only as the Incorporator.

If you need any additional information, you can reach us at

1-877-281-6496 (toil free) edstahlin@enitia.com

We have enclosed an additional \$8.75 for one "Certificate of Status". For your convenience, I have enclosed a self-addressed envelope.

Thank you,

Ed Stahlin Enitia Corporation 2009 JAN 30 PH 2: 46

## **COVER LETTER**

Registration Section

TO:

Division of Corporations
SUBJECT: <u>INTERNATIONAL GLASS &amp; Oction LLC</u> (Ala: IG&D, LLC)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thomas P. O'Connell (Name of Person)
Thomas P. O'Connell, P. A. 3 Thomas P. O'Company)
600 S. Andrews Ave
Fort Lauderdale FL 3330 F 5 (City/State and Zip Code)
For further information concerning this matter, please call:
Thomas P. O'Connell at (954) 527 - 1092  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\text{S130.00 Filing Fee & Certificate of Status}\$  Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}}  Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
Tuternational Glass & Design, L. L. Company, "L.L.C." or "LLC." or "LLC." or "LLC." or "LLC."
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
Thomas P. O' Connell, P.A.  Fort lauderdale, FL 33304  SUITE 407, Fort lauderdale, FL  33301
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Thomas A. O'Connell, P.A. Name
600 S. Andrews Ave., Suite 407  Florida street address (P.O. Box NOT acceptable)

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 (REQUIRED)

Fort Lauderdale FL City, State, and Zip

ARTICLE IV- Manager(s) or Manage The name and address of each Manage	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR President	Thomas P.O'Connell 600 S. Andrews Ave. SVITE 407 Fort Lauderdale, FL 33301
MGR Vice-President operations	Georgio J. Schmidt 1324 Silverado North Lauderdale FL 33068
MGR Vice President Public Relations	Camelia Gomez Hernandez 1324 Silverado North Lauderdale, Fl 33068
Vice President sales marketing	John J. Schmidt 1324 Silverado North Lauderdale, FL 33068
(Use attachment if necessary)  Secretary  ICLE V: Effective date, if other than the d	Alan Gomez, Hernandez 1324 Silveraclo NORTH LAUNERNALE, FL 330 (OPTIONAL)
effective date is listed, the date must be 90 days after the date of filing.)	specific and cannot be more than five business days prior

**REQUIRED SIGNATURE:** 

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.)

Typed or printed name of signee

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)