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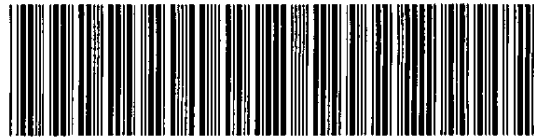
(Business Entity Name)

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TALLAHASSEE, FLORIDA

J. BRYAN

JUN - 4 2009

EXAMINER

**GLICKMAN, WITTERS AND MARELL, P.A.**

ATTORNEYS AT LAW  
THE CENTURION  
SUITE 1101  
1601 FORUM PLACE  
WEST PALM BEACH, FL 33401

GARRY M. GLICKMAN  
CURTIS L. WITTERS  
BOARD CERTIFIED IN MARITAL AND FAMILY LAW  
WILLIAM J. MARELL  
ELIZABETH A. MONTGOMERY  
CINDY A. CRAWFORD  
JOSEPH R. LOWICKY

TELEPHONE  
(561) 478-1111

TELECOPIER  
(561) 478-2433

June 2, 2009

Via Federal Express

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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Reference: **Cat 5 Shutters, LLC**

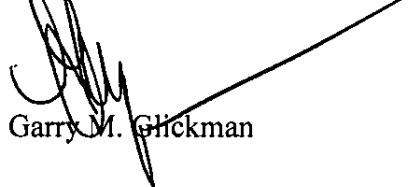
Gentlemen:

We are enclosing one original and a duplicate copy of the Articles of Organization for the above referenced proposed company together with a Designation of Registered Agent and Acceptance of Designation. The duplicate copy of the Articles have been subscribed and acknowledged by the subscriber in the same manner as the original.

Please endorse your approval of the Articles of Organization on the duplicate copy, certify and return it to us. Enclosed is our check in the amount of \$125.00 for the filing of these documents

Sincerely,

GLICKMAN, WITTERS & MARELL, P. A.



Garry M. Glickman

GMG:sn

Enclosures (as noted above)

**ARTICLES OF ORGANIZATION**

**OF**

**CAT 5 SHUTTERS, LLC**

The undersigned organizer hereby forms a limited liability company under the laws of the State of Florida:

**ARTICLE I**

**COMPANY NAME**

The name of this company is:

**CAT 5 SHUTTERS, LLC**

**ARTICLE II**

**COMMENCEMENT AND TERM OF EXISTENCE**

The term of existence of the Company shall commence on the date the Articles of Organization is filed with the Florida Secretary of State, and shall continue perpetually unless dissolved as set forth hereafter.

**ARTICLE III**

**MAILING ADDRESS OF THE COMPANY**

The mailing address of the limited liability company is 1000 Stinson Way, Unit 105, West Palm Beach, Florida 33411.

**ARTICLE IV**

**STREET ADDRESS**

The street address of the principal office of the limited liability company is:  
1000 Stinson Way, Unit 105, West Palm Beach, Florida 33411.

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## ARTICLE V

### REGISTERED AGENT AND REGISTERED AGENT'S ADDRESS

The Registered Agent and the street address of the Registered Agent of this Company in the State of Florida shall be:

Joel A. Wieder  
1000 Stinson Way, Unit 105  
West Palm Beach, Florida 33411

## ARTICLE VI

### INITIAL MANAGER

The Managing Member of the Company shall be:

Joel A. Wieder  
1000 Stinson Way, Unit 105  
West Palm Beach, Florida 33411

The Managing Member, Joel A. Wieder shall be responsible for the management of the Company, and shall have the full right, power and authority to manage, direct and control all of the business and affairs of the company and to transact business on its behalf.

Notwithstanding the foregoing, the Managing Member shall have the absolute authority to subcontract any management functions of the Company in his sole and absolute discretion.

## ARTICLE VII

### DISSOLUTION

The death, retirement, resignation, expulsion, bankruptcy or dissolution of a member shall not dissolve the Company as long as there remains in existence one (1)

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member. The Company shall dissolve only as provided in the Operating Agreement of the Company.

## ARTICLE VIII

### RIGHTS, LIABILITIES AND OBLIGATIONS OF MEMBERS

8.1 Liability of Members: No Member shall be personally liable for the expenses, liabilities, debts or obligations of the Company, unless otherwise provided pursuant to Florida Statute §608.

8.2 Return of Capital: No Member shall have the right to demand the return of his/her/its contribution to capital except as provided in the Company's Regulations and Operating Agreement then in existence.

8.3 Non-Assignability of Membership Interest: No Member may assign his Company interest in whole or in part without the express written consent of 100% of the Company's members, including the member attempting to assign his interest.

The assignee of a member's interest shall have no right to participate in the management of the business and affairs of the Company, except i) as provided in the Operating Agreement and, ii) upon the approval of 100% of the members of the limited liability company including the member assigning the limited liability interest and iii) in compliance with any procedure provided for in the Operating Agreement.

The assignee of the member's interest shall have no right to become or to exercise any rights or power of a member, except upon the express written approval of

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100% of the members of the Company, including the member assigning the interest.

IN WITNESS WHEREOF, the undersigned Organizer has executed the Articles of Organization, this 1 day of JUNE, 2009.

  
JOEL A. WIEDER, ORGANIZER

STATE OF FLORIDA

]

] ss:

COUNTY OF PALM BEACH

]

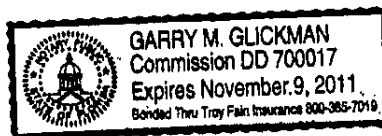
The foregoing instrument was acknowledged before me this 1 of JUNE, 2009, by JOEL A. WIEDER, Organizer of the afore-described Articles of Organization, who is personally known to me and did not take an oath.

NOTARY PUBLIC:

SIGN 

PRINT \_\_\_\_\_

STATE OF FLORIDA AT LARGE (SEAL)  
MY COMMISSION EXPIRES:



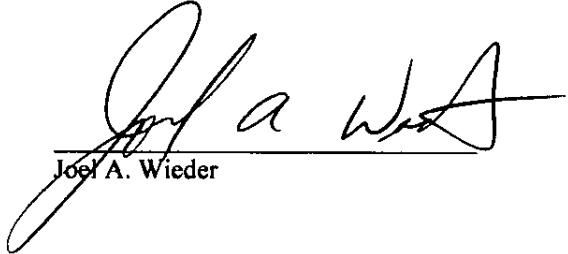
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**CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

CAT 5 Shutters, LLC, desiring to organize as a Limited Liability Company under the laws of the State of Florida with its principal office as indicated in the Articles of Organization, has named Joel A. Wieder, 1000 Stinson Way, Unit 105, West Palm Beach, Florida 33411 as its agent to accept Service of Process within this State.

**ACKNOWLEDGMENT**

Having been named to accept Service of Process for the above named Limited Liability Company, at the place designated in this Certificate, I hereby agree to act in this capacity, accept the appointment, and agree to comply with the provisions of the Florida Statutes relative to keeping open said office.

  
Joel A. Wieder

SWORN TO AND SUBSCRIBED before me this 1 day of June, 2009.



  
GARRY M. GLICKMAN, Notary Public - State of Florida

(Type, stamp or print)

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TALLAHASSEE, FLORIDA

Personally known or produced identification . If produced identification, type or identification produced: \_\_\_\_\_