

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L10000054633
FILED 8:00 AM
May 20, 2010
Sec. Of State
ncausseaux

Article I

The name of the Limited Liability Company is:

HAVE WINDOW PAINES LLC

Article II

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

288 FALLEN PALM DRIVE
CASSELBERRY, FL. 32707

The mailing address of the Limited Liability Company is:

288 FALLEN PALM DRIVE
CASSELBERRY, FL. 32707

Article III

The purpose for which this Limited Liability Company is organized is:

ANY LAWFUL PURPOSE

Article IV

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

THOMAS D GLASSMIRE
288 FALLEN PALM DRIVE
CASSELBERRY, FL. 32707

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.

Registered Agent Signature: THOMAS D GLASSMIRE

Article V

The name and address of managing members/managers are:

Title: MGRM
THOMAS D GLASSMIRE
288 FALLEN PALM DRIVE
CASSELBERRY, FL. 32707

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Article VI

The effective date for this Limited Liability Company shall be:

05/20/2010

Signature of member or an authorized representative of a member

Signature: THOMAS D GLASSMIRE