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From: Account Name : CSH SERVICES, LLC  
Account Number : 120070000160  
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**FLORIDA LIMITED LIABILITY CO.**

**Carpentry & Trim Solutions LLC**

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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608 and/or 621, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

CARPENTRY &amp; TRIM SOLUTIONS LLC

**ARTICLE II ADDRESS**The mailing address and street address of the principal office of  
Limited Liability Company is:22130 BELL HARBOR DR  
LAND O LAKES, FLORIDA 34639**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

LISA D PEREZ  
22130 BELL HARBOR DR  
LAND O LAKES, FLORIDA 34639

Having been named as registered agent 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.

x Lisa D. Perez  
LISA D PEREZ / Registered Agent's signature

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PAGE 2

CARPENTRY & TRIM SOLUTIONS LLC

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER

LISA D PEREZ

22130 BELL HARBOR DR

LAND O LAKES, FLORIDA 34639

MANAGING MEMBER

AVELIO PEREZ

22130 BELL HARBOR DR

LAND O LAKES, FLORIDA 34639

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x Lisa D. Perez

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.

LISA D PEREZ