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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146 Phone : (305)444-4994

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** STATE OF S

TRADE FINISH CARPENTRY & CABINETS LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

J. SAULSBERRY **EXAMINER**

Electronic Filing Menu

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OCT 15 2010

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10/14/2010

OC1-14-5012 2NN 01:32 VW

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TRADE FINISH CARPENTRY & CABINETS LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

_	• •	V 1 V
Principal Office Address:	Mailing Address:	
90 NE 68TH ST	90 NE 68TH ST	
MIAMI FL 33138	MIAMI FL 33138	
	s of the registered agent are:	2010 OCT 1
	Name	A 4
90 NE 68TH ST		
Florid	a street address (P.O. Box NOT acceptable)	© ₹ œ
MIAMI	_{FL} 33138	ORIUM ORIUM
-	City, State, and Zip	م م

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.,

(CONTINUED)

Page 1 of 2

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Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	JOSE MIGUEL GOMEZ	
· · · · · · · · · · · · · · · · · · ·	90 NE 68TH ST	
	MIAMI FL 33138	 ,
		 .
		
 		
(Use attachment if necessary)		
ICLE V: Effective date, if other than	the date of filing: (OP	TIONAL)
effective date is listed, the date mus	t be specific and cannot be more than five busin	ess days pi
90 days after the date of filing.)		
•		
DECIMED SIGNATION.		EGRETA
REQUIRED SIGNATURE:		SSX SSX
		
Inoa	Man Dames	
Jose M Signature of a mer	Day Omly_ mber or an authorized representative of a member.	STATE

Filing Fees:

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

JOSE MIGUEL GOMEZ

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

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee