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Florida Department of State
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To: Division of Corporations
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From: Account Name : CSH SERVICES, LLC
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FLORIDA LIMITED LIABILITY CO.
GOOD SHEPHERD WOOL INSULATION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

GOOD SHEPHERD WOOL INSULATION, LLC

ARTICLE II ADDRESS

The principal office of the Limited Liability Company is:

1612 INVERNESS ROAD

FERNANDINA BEACH, FLORIDA 32034

The mailing address of the Limited Liability Company is:

PO BOX 16662

FERNANDINA BEACH, FLORIDA 32035

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ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

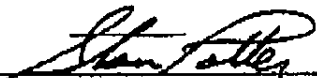
The name and the Florida street address of the registered agent are:

STANLEY G. POTTER JR.

1612 INVERNESS ROAD

FERNANDINA BEACH, FLORIDA 32034

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 

STANLEY G. POTTER JR./ Registered Agent's signature

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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:

STANLEY G. POTTER JR.

PO BOX 16662

FERNANDINA BEACH, FLORIDA 32035

X  _____

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.

STANLEY G. POTTER JR.

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