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To: Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
PyroRacks LLC

Certificate of Status	0
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A. LUNT

MAY 31 2011

EXAMINER

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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:

PYRORACKS LLC

ARTICLE II ADDRESS

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

2028 N. SORRENTO HILLS RD
SAINT AUGUSTINE, FL 32092

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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:

SHERMAN WELLS
2028 N. SORRENTO HILLS RD
SAINT AUGUSTINE, FL 32092

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 

SHERMAN WELLS / Registered Agent's signature

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PAGE 2 PYRORACKS LLC

ARTICLE IV MANAGEMENT

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

ARTICLE V MEMBERS (optional)

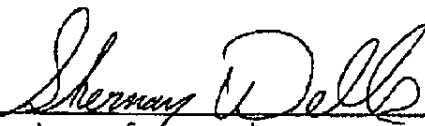
MANAGING MEMBER
SHERMAN WELLS
2028 N. SORRENTO HILLS RD
SAINT AUGUSTINE, FL 32092

MANAGING MEMBER
ANJA KROGH
2028 N. SORRENTO HILLS RD
SAINT AUGUSTINE, FL 32092

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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.

SHERMAN WELLS

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