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Fax Number : (850) 617-6383

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**FLORIDA LIMITED LIABILITY CO.  
KTS Carpentry Trim LLC**

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**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:

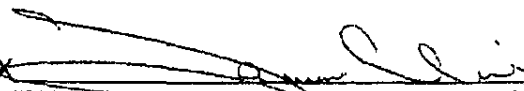
KTS CARPENTRY TRIM LLC

**ARTICLE II ADDRESS**The mailing address and street address of the principal office of the  
Limited Liability Company is:2757 FERN PALM DRIVE  
EDGEWATER, FLORIDA 32141**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

TAMMIE CLINE  
2757 FERN PALM DRIVE  
EDGEWATER, FLORIDA 32141

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  10-1-2012  
TAMMIE CLINE / 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**

MANAGING MEMBER

TAMMIE CLINE

2757 FERN PALM DRIVE

EDGEWATER, FLORIDA 32141

MANAGING MEMBER

SHANE CLINE

2757 FERN PALM DRIVE

EDGEWATER, FLORIDA 32141


MANAGING MEMBER

KIM CLINE

2757 FERN PALM DRIVE

EDGEWATER, FLORIDA 32141

.....

 10-1-2012  
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.

TAMMIE CLINE

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