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EFFECTIVE DATE 12 34/15

and statement Office Use Only 11

COVER LETTER

TO:	Registration Division of C	Section Corporations				
SUBJE	ECT: <u>Durasti</u>	II USA LLC		<u> </u>		
		Name of Li	mited Liability Company			
			* **			
The en	closed Articles	of Organization and fee(s)	are submitted for filing.			
Please	return all corre	spondence concerning this r	natter to the following:			
	Sherry L	Myers			_	
			Name of Person			
	Durastill	USA LLC	D: /6			
			Firm/Company			
	12137 E	merald Green Court	Address		-	
			/ tudi ess			
	Jackson	ville FL 32246				
		1	City/State and Zip Code			
Di	urastillUSA@	amail com		•	•	
ريو_		E-mail address: (to be us	ed for future annual report notifica	ition)	Ħ	
Con firm	thar informatio	n concerning this matter, ple	ance coll:	2 - 220 2 - 220 2 - 200	EC	
ror lun	uici illiolillatio	in concerning ans matter, po	case can.		S.	(Charles
				S S S	$\frac{\omega}{\omega}$	-
Sherry	L Myers		904 <u>254-6472</u>	mo	P	
	Nan	ne of Person	Area Code Daytime Tel	lephone Number		Spinners ft f
				X	::5	
Enclose	ed is a check fo	or the following amount:			=	
□ \$125.0	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	✓ \$160.00 Filing Fee, Certificate of Status & Certified Copy		
				(additional copy is enclo	sea)	

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 266! Executive Center Circle Tailahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Durastill USA LLC (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office.	ice of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
12137 Emerald Green Court Jacksonville FL 32246	12137 Emerald Green Court Jacksonville FL 32246	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an in	dividual or
The name and the Florida street address of the registered a	gent are:	
Sherry L Myers Name		
12137 Emerald Green Court Florida street address (P.O. Box I	NOT acceptable)	
Jacksonville	FL 32246	
City	Zip	
Having been named as registered agent and to accept serv the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig Chapte	the appointment as registered agent and agi f all statutes relating to the proper and comp	ree to act in this plete performance
Sherry O	Y. Myseus ire (REQUIRED)	
Registered Agent's Signatu	iic (NEQUINED)	15.55 15.55
(CONTINUE	(D)	men g IT
Page 1 of 2		

EFFECTIVE DATE 12/24/15

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Sherry L Myers	
	12137 Emerald Green Court	
	Jacksonville FL 32246	
AMBR	Joseph G Myers	
	12137 Emerald Green Court	
	Jacksonville FL 32246	
AMBR	Andrea N Myers	
7 110165()	12137 Emerald Green Court	•
	Jacksonville FL 32246	-
		•
AMBR	Alexis M Myers	
<u></u>	12137 Emerald Green Court	
	Jacksonville FL 32246	
(Use attachment if necessary) EV: Effective date, if other than tective date is listed, the date must of filing.)	he date of filing: 12-24-2014 (OPTIONAL) t be specific and cannot be more than five business days prior to or	90 day
E V: Effective date, if other than tective date is listed, the date mus	he date of filing: 12-24-2014 (OPTIONAL)	90 day
E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	the date of filing: 12-24-2014 (OPTIONAL) t be specific and cannot be more than five business days prior to or	
E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of the constitutes an affirmation of the constitutes an affirmation of the constitutes are that any false.	he date of filing: 12-24-2014 (OPTIONAL)	
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