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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

ARTICLE I.

The name of the Limited Liability Company is K & S Forming, L.L.C.

ARTICLE II.

The mailing address and the street address of the principal office of the Limited Liability Company is 5845 Jacaranda Drive, Suite C, Mableton, Georgia 30059.

ARTICLE III.

The period of duration of the company shall be perpetual or until the termination of the company in accordance with regulations of the company.

ARTICLE IV.

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

<u>Name</u>	<u>Address</u>
John J. Snider	5845 Jacaranda Drive, Suite C Mableton, Georgia 30059
Pamela W. Snider	5845 Jacaranda Drive, Suite C Mableton, Georgia 30059

ARTICLE V.

Any Person approved by all of the Managers and Members holding at least a Majority Interest may become a Member in the Company by the issuance by the Company of Membership Interests for such consideration as the Managers and Members holding a Majority Interest shall determine.

ARTICLE VI.

The Company shall be dissolved following the occurrence of an "Event of Disassociation"; which includes but is not limited to death, retirement, resignation, expulsion, bankruptcy, or dissolution; as to a Member who is a Manager or the ninetieth (90<sup>th</sup>) day after there is no Member who is a Manager, unless within such 90-day period the Company is continued by the affirmative Majority Vote of the Members other than the Member as to whom

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the Event of Disassociation occurred. The occurrence of an Event of Disassociation as to a member who is not a Manager will not cause the Company to be dissolved.

\* \* \* \* \*

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1) The name of the limited liability company is: K & S Forming, L.L.C.
- 2) The name and address of the registered agent and office is:

Ruth G. Reinert  
\_\_\_\_\_  
(NAME)

Apt. 109, 1660 Pine Valley Drive  
\_\_\_\_\_  
(P.O. Box **NOT** ACCEPTABLE)

Ft. Myers, Florida 33907  
\_\_\_\_\_  
(CITY/STATE/ZIP)

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*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.*

*Ruth G. Reinert*  
\_\_\_\_\_  
(SIGNATURE)

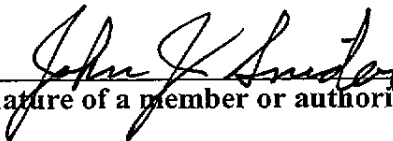
*5/22/98*  
\_\_\_\_\_  
(DATE)

**Filing Fee: \$ 35 for Designation of Registered Agent**

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of K & S Forming, L.L.C. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 1,000
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0  
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ 1,000  
This total includes amounts from 2 and 3 above.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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