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Division of Corporations

P.O. Box 6327

Tallahassee FL 32314

ATTN: Tyrone Scott

To Whom It May Concern,

I am the owner of The Learning Strategy, Inc. I paid \$122.for the conversion and started a new LLC, The Learning Strategy, LLC.

Attached is a check for \$2.50.

Thank You,

Jeffrey S Roth

The Learning Strategy, Inc.

Phone: (813) 494-2098

Email: jeffroth@tlstrategy.com

17 HEY 15 PH 12: 42

COVER LETTER

Division of Corporations
SUBJECT: The Learning Strategy, LCC Name of Control Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeffrey 5, Roth Name of Person
The Learning Strategy, LLC Firm/Company
30220 Ingolfs Court. Address
Wesley Chopel FC 33543 City/State and Zip Code Jeffwth ettstrategy, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street Address

New Filing Section

TO:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ΑF	lT1	CI.	Æ	Ī-	Nai	me:
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The name of the Limited Liability Company is:

The Learning Strategy LLC

(Must contain the words "Limited Liability Company," L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
30220 Ingalls Ct.	30220 Treally Ct.
Wesler Charel FL 33543	Wegler Chapel FC 33542

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Teffing S. Rofg

Name

30220 Ingol/s Ct.

Florida street address (P.O. Box NOT acceptable)

Westeg Chapel FL 33543

City State Zip

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 as provided for in Chapter 605, F.S..

(CONTINUED)

17 MAY 17 AM 8: 46

"MCD" — Managar .	Name and Address:
"MGR" = Manager	Jefforg S. Roth 3020 Ingolls Ct. Wesley Chepel, Fr. 33543
	
e date of filing.)	e of filing: 5/11/2-017 (OPTIONAL) secific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed a
	OI STATE STEEDIUS.
e document's effective date on the Department RTICLE VI: Other provisions, if any.	of State 8 fectorus.
e document's effective date on the Department RTICLE VI: Other provisions, if any. REOUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a m This document is execut I am aware that any fals constitutes a third degree	ember or an authorized representative of a member. sted in accordance with section 605.0203 (1) (b), Florida Statutes. the information submitted in a document to the Department of State the felony as provided for in s.817.155, F.S. Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-