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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES
Account Number : I19980000007
Phone : (407) 425-1020
Fax Number : (407) 839-3635

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

HEIKE KNAUS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is HEIKE KNAUS, LLC.

ARTICLE II – Address:

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

Principal Office Address:

5058 Brightmour Circle
Orlando, FL 32837

Mailing Address:

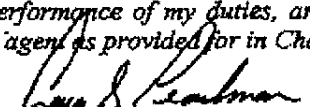
5058 Brightmour Circle
Orlando, FL 32837

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

The name and Florida street address of registered agent are:

Craig S. Pearlman
2 S. Orange Avenue, 5th Floor
Orlando, FL 32801

Having been named as registered agent and to accept service of process for the above state 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.


Craig S. Pearlman, Registered Agent

ARTICLE IV – Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM**Name and Address:**

Heike Knaus
5058 Brightmour Circle
Orlando, FL 32837



Signature

Heike Knaus

Typed or printed name of signee

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