Requester's Name GVC FINANCIAL INC 978 Douglas Ave #102 Altiamonte Springs, FL 32714 City/State/Zip Phone

Office Use Only

Examiner's Initials

| CORPORATION NAME(S) | & DOCUMENT NUMBER(S), | (if known): |
|---------------------|-----------------------|-------------|
|---------------------|-----------------------|-------------|

| 1(Corporation Name) 2(Corporation Name) | - (Document #) - (Document #) | |
|--|--|---|
| 3(Corporation Name) | (Document #) | - |
| 4. (Corporation Name) Walk in Pick up time Mail out Will wait | Certified Copy on Certificate of Status | |
| NEW FILINGS Profit Not for Profit Limited Liability Domestication Other | AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Merger | X |
| OTHER FILINGS Annual Report Fictitious Name | REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is: | |
|--|---|
| Colorcharts, LLC | |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: | |
| 860 Lake Catherine Dr. Mai Hand, FL 32751 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: | |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: | |
| The name and the Florida street address of the registered agent are: | |
| Terry J. Winch 860 Lake Catherine Dr | |
| 860 Lake Catherine Dr | |
| Florida street address (P.O. Box NOT acceptable) Thortional, FL 3275/ | |
| City, State, and 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 608, F.S | |
| Article IV - Management (Check box if applicable.) | 1 |
| The Limited Liability Company is to be managed by one manager of more more more more more more more more | |
| 4 844 | - |
| (An additional article must be added) if an effective date is requested) | |
| 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.) | |
| Terry J. Winch Typed or printed name of signee | |
| FILING FEES: \$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL) | |