Clark Trainor, Esq. 11500 West Olympic Blvd., Suite 400 Los Angeles, CA 90064

City/State/Zip

Phone #

Office Use Only

Examiner's Initials

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

1	
(Corporation Name)	(Document #) 5009034110853
2(Corporation Name)	(Document #) ****155.00 ****155.00
3. (Corporation Name)	(Document #)
4(Corporation Name) Walk in Pick up time	(Document #) Certified Copy
☐ Mail out ☐ Will wait NEW FILINGS	Photocopy Certificate of Status AMENDMENTS
☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other OTHER FILINGS ☐ Annual Report ☐ Fictitious Name	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership
	☐ Reinstatement ☐ Trademark ☐ Other

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 4, 2000

CLARK TRAINOR 11500 WEST OLYMPIC BLVD., SUITE 400 LOS ANGELES, CA 90064

Ref. Number: W00000024080

We have received your document for and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the name of Limited Liability Company in article I.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 200A00052599

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: CHESSA INTERNATIONAL, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2622 WEST MEMORIAL BLUD. LAKELAND, FL. 33815

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

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

	Name
432 Mocking Bird	d Lane
Florida street addre _akeland	ss (P.O. Box <u>NOT</u> acceptable) FL 33801
Cit	y, 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.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

> (An additional a 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.)

Pat D. Palmer

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)