Nancy S. Stratto Requester's Name	0003	3403	<b>S</b>
Special EFX Address  12305-A Leand St.  City/State/Zip Phone #  Larso, FL 331	Mr. o	WO 1 4000037 ****125	-4199 145534 1.00 ****125.00
CORPORATION NAME(S) & DOCU	ment niimbed/s) /:	Office Use Only	,
1. 00789-00707- (Corporation Name)  2. (Corporation Name)  3. (Corporation Name)	OOSDY-OO (Document #) (Document #)	101/00647	<u>-</u> 00 <i>6</i> 7/ -
4	(Bocument #)		
(Corporation Name)	(Document #)		<del></del> '
☐ Walk in ☐ Pick up time		Certified Copy	-
☐ Mail out ☐ Will wait	Photocopy	Certificate of Sta	atus
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	Change of Regis Dissolution/With Merger	ndrawal	FIL OI MAR -6 SECRETARY TALLAHASSE
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/O		FILED  R -6 PM 3: 58  TARY OF STATE ASSEE, FLORIDA
CR2E031(7/97)		Examiner's Initia	ls



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 22, 2001

NANCY S. STRATTON 12305-A 62ND STREET N. LARGO, FL 33773

SUBJECT: SPECIAL EFX Ref. Number: W01000004199

We have received your document for SPECIAL EFX and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

You must complete the attached form to qualify a foreign LLC to transact business in Florida, also, the name must have a suffix, such as, LLC, LC, Ltd. Co., Limited Company or Limited Liability Company.,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 901A00011209

ARTICLES OF ORGANIZATION

FOR LLC

I. Name of Company:

Special EFX, LLC

2. Mailing address:

12305-A 62<sup>nd</sup> St. North Largo, FL 33773

3. Registered Agent and Officer:

Nancy S. Stratton

4. Address:

12305-A 62<sup>nd</sup> St. North Largo, FL 33773 727.536.3007

5. Management:

Managed by Members:

Nancy S. Stratton

Signature

FILED

## 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	. The name of the Limited Liability Company is:		
	SPECIAL EFY, LLC		
2.	The name and the Florida street address of the registered agent and office are:		
	SPECIAL EFY, LLC (Name)		
	Florida street address (P.O. Box NOT ACCEPTABLE)		
	LArGO FL 33773 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 608, F.S..

Dany S. Shathn (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)