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SSi

Steinberg Sales

P.O. Box 470988 Lake Monroe FI 32747 000003799100--7 -03/05/01--01145--007 ****125.00 *****125.00

Office Use Only

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

| 1. | | |
|---|---|--------------------------------------|
| (Corporation Name) | (Document #) | |
| 2(Corporation Name) | (Document #) | |
| 3(Corporation Name) | (Document #) | |
| 4 (Corporation Name) | (Document #) | |
| ☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait | Photocopy | Certified Copy Certificate of Status |
| NEW FILINGS | AMENDMENTS | 5: 00 |
| ☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other | Amendment Resignation of R. Change of Regist Dissolution/With Merger | |
| OTHER FILINGS Annual Report Fictitious Name | REGISTRATION/Q Foreign Limited Partnersh Reinstatement Trademark Other | 1.0(-)4H |

CR2E031(7/97)

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Steinberg Sales, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 439 Still Forest Terrace Sanford, FC 32771 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are Tullay D. Steinbers Florida street address (P.O. Box NOT acceptable) 3 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 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), Aldrida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILING FEES:

Typed or printed name of signee

S 100.00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (OPTIONAL)

S 5.00 Certificate of Status (OPTIONAL)