Conan Leonard
Requester's Name

30·50 W Thorpe St
Address

Tallahassee FL 32303
City/State/Zip   Phone #

850·680·3887

LO100000 7023

Office Use Only

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

1. *Strauss Kelly L.L.C.* _____
(Corporation Name)   (Document #)

2. _____
(Corporation Name)   (Document #)

effective date. 4-30-01

3. _____
(Corporation Name)   (Document #)

4. _____
(Corporation Name)   (Document #)

☒ Walk in   ☒ Pick up time _____   ☒ Certified Copy

☐ Mail out   ☒ Will wait   ☐ Photocopy   ☐ 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

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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-05/04/01--01053--002
****155.00 ****155.00

Examiner's Initials _____

5-4-01

CR2E031(7/97)

ARTICLES OF ORGANIZATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Limited Liability Company Act, hereby adopts the following Articles of Organization.

ARTICLE I   NAME
The name of the corporation shall be:

Strauss Kelly, L.L.C.

ARTICLE II   PRINCIPLE OFFICE
The principle place of business and mailing address of this corporation shall be:

3050 West Tharpe Street

Tallahassee, FL 32303-1130

ARTICLE III   INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:

John A. Kelly, IV

3050 W. Tharpe Street

Tallahassee, FL 32303

ARTICLE IV   MANAGEMENT
This company shall be a manager–managed company.

ARTICLE V EFFECTIVE DATE
The effective date this corporation shall become active:

April 30, 2001

_____   ___5/2/01_____
Signature / Organizer   **Date**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept 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.

_____   ___5/2/01_____
Signature / Registered Agent   **Date**