0100	0015037
Scott D. Smith 4015 Bayshore Blvd. #10A Tampa, FL 33611	
City/State/Zip Phone #	
CONTOR A MYON NA MECCO . C. DOCUM	Office Use Only
CORPORATION NAME(S) & DOCUM	/IENT NUMBER(S), (II KNOWN):
1. (Corporation Name)	(Document #) W01-19625
2. (Corporation Name)	(Document #) O SET OF
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time Mail out ☐ Will wait	Certified Copy Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS 300045431635 -08/20/0101131002 ****125.00 ****125.00
 □ Profit □ Not for Profit □ Limited Liability □ Domestication □ Other 	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
2	Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 23, 2001

SCOTT D. SMITH 4015 BAYSHORE BLVD. #10A TAMPA, FL 33611

SUBJECT: SS HOLDINGS LLC Ref. Number: W01000019625

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

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 201A00048165

SECRETARY OF STATE BIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SS HOLDINGS LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

4015 BAYSHORE BOULEVARD #10 A TAMPA, FL 33611

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

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

GLENN SMITH					
Name					
4427 WEST KENNEDY	BOULEVARD	SUITE	300		
Florida street address (P.O. Box NOT acceptable)					
TAMPA	FL 3360) 9			
City, State, a	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..

Registered Agent's Signature

Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more manager	s and i	s,
therefore, a manager - managed company.	01	
(An additional article must be added if an effective date is requested)	SEP-	O Morne

Signature of a member of 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.)

Scott D. Smith
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)