

L010000015124

Kisha Madison
10518 Faye Way
Tallahassee, FL 32317

July 24, 2001

Registration Section
Divisions of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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***125.00 ***125.00

To Whom It May Concern:

This letter is accompanied by a completed Articles of Organization Agreement and check for all applicable fees.

Sincerely,

Kisha Madison

Kisha Madison
Registered Agent

L01-15124

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DIVISION OF CORPORATIONS
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

After School Place, LLC

ARTICLE II - Address:

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

Mailing address:

10518 Faye Way
Tallahassee, FL 32317

Physical Street Address: 2065 Thomasville Road
Tallahassee, FL 32306

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

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

Kisha Madison
Name
10518 Faye Way
Florida street address (P.O. Box NOT acceptable)
Tallahassee, FL 32317
City, 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.

K. Madison
Registered Agent's Signature

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)

K. Madison
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.)

Kisha Madison
Typed or printed name of signer

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)

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