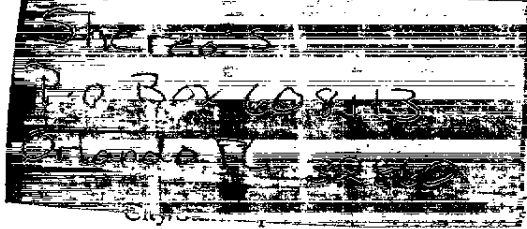


L-020000002005



400004791364--1
--01/23/02--01042--003
****160.00 ****160.00

Office Use Only

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

1. SHEREAS LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN 23 PM 1:04

W4/28

Examiner's Initials

3p

**ARTICLES OF ORGANIZATION
OF
SHEREAS LLC**

ARTICLE I-NAME OF Limited Liability Company

The name of the limited liability company is Shereas LLC. This limited liability company shall exist in perpetuity commencing on the date of execution and acknowledgement of these articles.

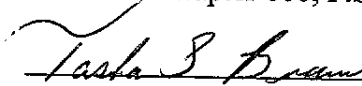
**ARTICLE II- MAILING ADDRESS AND
STREET ADDRESS OF PRINCIPAL OFFICE**

The mailing address of Shereas LLC is P.O. Box 608113 Orlando, FL 32860. The principal street address of Shereas LLC is 875 Grand Regency Point Apt.202, Altamonte Springs, FL 32714.

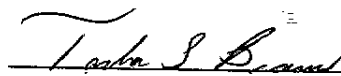
ARTICLE III-REGISTERED AGENT

The street address of the initial registered office of this limited liability company is 875 Grand Regency Point Apt. 202, Altamonte Springs, FL 32714 and the same of the initial registered agent of this limited liability company at that address is Tasha S. Brown, who by her signature at the end hereof, accepts such designation.

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.

_____

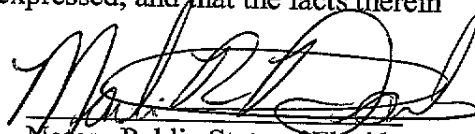
In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

_____


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN 23 PM 1:04

STATE OF FLORIDA
COUNTY OF

Before me the undersigned authority, duly authorized under the laws of the State of Florida to administer oaths and take acknowledgements. The said individuals personally appeared before me and produced identification, who subscribed to and signed the above and foregoing Articles of Organization, and they, being by me first duly sworn, acknowledge and stated that they made and subscribed the above and foregoing Articles of Organization for the uses and purposes therein expressed, and that the facts therein stated are truly set forth.


Notary Public State of Florida

25 December 2004
My commission Expires

 Martin R Daniels
My Commission CC989814
Expires December 25, 2004

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN 23 PM 1:04