

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

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From:

Account Name : PAUL SMITH

Account Number: I20010000247

Phone : (305) 673-0347

Fax Number : (305)532-0738

LIMITED LIABILITY COMPANY

KSA INVESTMENTS, LLC

 Certificate of Status
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PAGE 02

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE! NAME

The name of the Limited Liability Company is:

KSA INVESTMENTS, LLC

ARTICLE II ADDRESS

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

1942 MUIRFIELD WAY

OLDSMAR, FL 34677

ARTICLE W REGISTERED AGENT, REGISTERED OFFICE & REIGSTERED AGENT SIGNATURE

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

KARLYN KAY WIGGERS

1842 MUIRFIELD WAY

OLDSMAR, FL 34677

Having been named as registered agent to accept service of process for the above stated limited liability company at the piace 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 duffes, 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

The Limited Liability Company is to be managed by one member or more members and is, therefore, member - managed company.

ARTICLE V MEMBERS (Optional)

Managing Member: KARLYN KAY WIGGERS 1942 MUIRFIELD WAY OLDSMAR, FL 34677 CRETARY OF STATE A
LLAHASSEE, FLORIDA
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PAGE 01

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PAGE 2 KSA INVESTMENTS, LLC

ARTICLE V

The liability of the members and managers of the LLC for monetery damages shall be eliminated to the fullest extent permissible under Florida law.

Nothing contained in these Articles of Organization shall limit or preclude the exercise of any right relating to Indemnification or advancement of attorney's fees and expenses to any person who is or was a member or manager of the LLC.

Karlyn Kay Waggers

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.

KARLYN KAY WIGGERS
Typed or printed name of signes

SECRETARY OF STATE TALLAHASSEE. FLORIDA

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