

Certificate of Status	1
Certified Copy	0
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ARTICLES OF ORGANI	ZATION FOR FLORIDA LIMITED LIABILITY (COMPANY
ARTICLE I - Name The name of the Limited Liability Compa	nyis: FogKorp LLC	
2624 Fa	the principal office of the Limited Liability Company is: irmont Avenue ayrna, FL 32168	FILED SECRETARY OF STAT TALLAMASSEE, FLOR 02 MAR 27
ARTICLE III - Registered Ager The name and Florida street address of th	nt, Registered Office & Registered Agent's signature ne registered agent are:	ORIDA
	Bryan Bassett	
-	Name	
	2624 Fairmont Avenue	

HUB

obligations of my position as registered agent as provided for in Chapter 608, F.S. Registered Agent's Signature - Bryan Bassett

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

(P.O. Box or Mail Drop Box NOT Acceptable)

(City / State / Zip)

ARTICLE IV - Management (Check box if applicable)

03/27/2002 13:29

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The Limited Liability Company is to be managed by one manager or more managers and is,

New Smyrna, FL 32168

therefore, a manager - managed company Signature of a member or 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.)

Roger P. Earl

Typed or printed name of signee

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