

LD20000 12798

April 29, 2002

To Whom It May Concern;

I wish to form a LLC, my name and address is as follows;

Diadra K. Kiser
3934 Pascay Court
Holiday, Florida 34691
(727) 938-8403

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02 MAY 24 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

855/534 / 623/671

LD20000 12798
5/24/02



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 17, 2002

DIADRA K. KISER
3934 PASCAY COURT
HOLIDAY, FL 34691

SUBJECT: EFFICACY PRODUCTS, LLC
Ref. Number: W02000014377

We have received your document for EFFICACY PRODUCTS, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Please accept our apology for failing to mention this in our previous letter.

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) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 502A00031734

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: EFFICACY Products, LLC

ARTICLE II - Address:

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

5609 US HIGHWAY 19 SUITE E,
NEWPORT RICHEY, FLORIDA 34652

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

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

DIADRA K. RISKER
Name
3934 PASCAU CT
Florida street address (P.O. Box **NOT** acceptable)
HOLIDAY FL 34691
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..

Diadra K. Risker
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)

Diadra K. Risker
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.)

DIADRA K. RISKER
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)

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TALLAHASSEE, FLORIDA