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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: K. W. Sloavs, LLC (Name of Limited Liability Company)	<del></del> -		
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
K. Wayne Sloan (Name of Person)	_		
K.W. Sloan, LLC	_TAG		
(Firm/Company)	A	] <b>≥</b>	40mt/FFEE
26326 SW 1st Avenue (Address)	<u> </u>	O3 NOV 1	
(Address)	SEC.	ယ	
Newberry, FL 32669		PH 2	
(City/State and Zip Code)	FLORIDA	2: 53	,
For further information concerning this matter, please call:	₽		
K. Wayne Sloan at 352, 213-6203			
(Name of Person) (Area Code & Daytime Telephone Number)			

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
K.W. Sloan, 1	LLC	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	TACE OS
26326 SW 10+ Ave	same	NO TO
		<u> </u>
•		
	- Marris de la la <u>Augustiana de la Constantina del Constantina de la Constantina del Constantina de la Constantina de l</u>	
The name and the Florida street address of the region of t	Sloan	
Newberry, FL City, State, an	FLORIDA 321069 ad Zip	
Having been named as registered agent and to accept servi company at the place designated in this certificate, I hereby agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar registered agent as provided for in Ch	y accept the appointment as reg the provisions of all statutes rel with and accept the obligations apter 608, Florida Statutes	istered agent and ating to the proper

Page 1 of 2 (CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		± + 8.5
MGR	K. Wayne Sloan 26376 SW 1st Avenue	
	Newberry, FL 32667	
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(Use attachment if necessary)	<u> </u>	
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NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:	e Slow	

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.)

K. Wayne Sloan
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)