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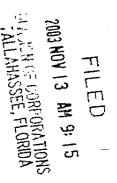
(Requestor's Name)	
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PICK-UP WAIT MAIL	
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# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Electricians' Success Internationa	al, LLC
	ited Liability Company)
The enclosed Articles of Organization and fee(s) are	e submitted for filing.
Please return all correspond	(Name of Person)  (Firm/Company)
Kenneth E. Armstrong	The state of the s
	(Name of Person)
VenVest Ventures, Inc.	
	(Firm/Company)
2 N. Tamiami Trail, Suite 506	· · · · · · · · · · · · · · · · · · ·
	(Address)
Sarasota, FL 34236	
(Ci	(ity/State and Zip Code)
For further information concerning this matter, please	ise call:
Kenneth E. Armstrong	at ( 941 ) 366-9692
(Name of Person)	(Area Code & Daytime Telephone Number)

STREET ADDRESS:

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

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ABOUT S M S. 15

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Electricians' Success International, LLC

## ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
2 N. Tamiami Trail	2 N. Tamiami Trail
Suite 506	Suite 506
Sarasota, FL 34236	Sarasota, FL 34236
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registe	

Kenneth E. Armstron	·g	
	Name	
2 N. Tamiami Trail,	Suite 506	
Florida street address (P.O. Box NOT acceptable)		
Sarasota	FLORIDA 34236	
Cit	y, 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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Manage The name and address of each Manage	
The name and address of each manage	
Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	James Abrams
	2 N. Tamiami Trail, Ste 506
	Sarasota, FL 34236
MGR	John Young
110.10	13950 Switzer
	Overland Park, KS 66221
MGR	Patrick Kennedy
	2064 Canton Rd
	Marietta, GA 30066
-	
(Use attachment if necessary)	
NOTE: An additional article must b	e added if an effective date is requested.
NOTE. An additional afficie music	e audeu ii an ciicciiic unic is requesteu.
REQUIRED SIGNATURE:	
	alm
Signature of a member or an	authorized representative of a member.
(In accordance with section 60	98.408(3), Florida Statutes, the execution
of this document constitutes ar	affirmation under the penalties of perjury
that the facts stated herein are	true.)
James D	. Abrams
Typed or p	orinted 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)