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From:

Account Name : HUBCO

Account Number : 104652003400 Phone : (516)935-3940

Fax Number : (516) 935-3088

LIMITED LIABILITY COMPANY

Kanozsay Services, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: KANOZSAY SERVICES, 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:
1667 Waldemere Street	1667 Waldemere Street
Sarasota, FL 34239	Sarasota, FL 34239
ARTICLE III - Registered Agent, Re	gistered Office & Registered Agent's Signature
M	lichael Kanozsay
	Name SNA 5
_16	667 Waldemere Street
	(P.O. Box or Mail Drop Box NOT Acceptable)
S	arasota, FL 34239
	(City / State / Zip)
at the place designated in this certificate, I l capacity. I further agree to comply with the of my duties, and I am familiar with and acc Chapter 608, F.S.	to accept service of process for the above stated limited liability company hereby accept the appointment as registered agent and agree to act in this provisions of all statutes relating to the proper and complete performance expt the obligations of my position as registered agent as provided for in Agent's Signature - Michael Kanozsay

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ARTICLE IV - Manager(s) or The name and address of each Manager	Managing Member(s): H03000336828 ger or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Michael Kanozsay, 1667 Waldemere Street, Sarasota, FL 34239
(Use attachment if necessary)	
REQUIRED SIGNATURE:	Michael Kanozsan
Signature o	f a member or authorized representative of a member.
(In accordant document con stated herein	stitutes an affirmation under the penalties of perjury that the facts

Michael Kanozsay Typed or printed name of signee