

**W4000037070****(3)**

Florida Department of State  
Division of Corporations  
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**MJH**

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## To:

Division of Corporations  
Fax Number : (850)205-0383

## From:

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Account Number : 120000000123  
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DIVISION OF CORPORATION

**LIMITED LIABILITY COMPANY****Kreeos, LLC**

Certificate of Status	1
Certified Copy	2
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Estimated Charge	\$190.00

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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:  
**KREEOS, LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

3531 Valley Trail  
Lakeland, Florida 33810

**Mailing Address:**

P.O. Box 195  
Kathleen, Florida 33849

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

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

Laurie B. Rice  
3531 Valley Trail  
Lakeland, Florida 33810

*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

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

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

**Title****Name and Address:**

"MGR" = Manager

"MGRM" = Managing Member

MGR

Bryan B. Rice  
3531 Valley Trail  
Lakeland, Florida 33810

MGRM

Kerwin S. Ivey  
3531 Valley Trail  
Lakeland, Florida 33810

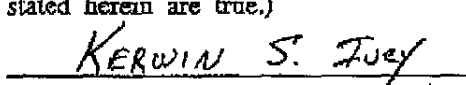
MGRM

Laurie B. Rice  
3531 Valley Trail  
Lakeland, Florida 33810

MGRM

Eric D. Dodson  
3531 Valley Trail  
Lakeland, Florida 33810**NOTE:** An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**  
\_\_\_\_\_  
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.)

  
\_\_\_\_\_  
KERWIN S. Ivey

Typed or printed name of signee

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