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TO: CORPORATIONS

LO50000 12552

Florida Department of State  
Division of Corporations  
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(((H05000031441 3)))

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To:

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

From:

Account Name : KANETSKY, MOORE & DEBOER, P.A.  
Account Number : 075350000267  
Phone : (941) 485-1571  
Fax Number : (941) 484-7226

LIMITED LIABILITY COMPANY

Ganakas, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
| Page Count            | 02       |
| Estimated Charge      | \$155.00 |

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KANETSKYMOOREDEBOER

NO. 0861 P. 2/3

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ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GANAKAS, LLC

ARTICLE II - Address

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

924 Pepplebrook Lane  
East Lansing, MI 48823

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

The name and street address of the registered agent are:

Diane L. Bernick  
555 The Esplanade, Apt. 405  
Venice, FL 34285

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE  
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.

Diane L. Bernick  
Diane L. Bernick

This instrument prepared by:  
Erik R. Lieberman, Esq.  
P. O. Box 1767  
Venice, FL 34284-1767  
941-485-1571  
FL Bar #393053

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KANETSKYMOOREDEBOER

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Gary Ganakas  
924 Pepplebrook Lane  
East Lansing, MI 48823

**REQUIRED SIGNATURE:**

Diane L. Bernick

Signature of an authorized representative  
of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit  
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Diane L. Bernick

Typed or Printed Name of Signee

**FILED**  
2005 FEB -7 AM 8:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This instrument prepared by:  
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P. O. Box 1767  
Venice, FL 34284-1767  
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