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### TRANSMITTAL LETTER

TO: Registration Se Division of Cor					
SUBJECT:	Comfy Corner	Preschool, LLC			
(Name of Limited Liability Company)					
	Organization and fee(s) are su				
Vickie L., Lindquist					
(Name of Person)					
Comfy Corner Preschool, LLC					
	(I	irm/Company)			
	2401 - 7	2nd Street North			
(Address)					
Saint Petersburg, Florida 33710					
	(City/	State and Zip Code)			
For further information	concerning this matter, please of	eali:			
Vickie L. or Jos	eph R. Lindquist	at ( 727 ) 866-1239 (Area Code & Daytime Te			
(Name	of Person)	(Area Code & Daytime Te	lephone Number)		
Enclosed is a check fo	or the following amount:				
☐ \$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

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

The name of the Limited Liability Com			
•	pany is:		
Comfy Corner Preschool, LL	<u>C</u>		
ARTICLE II - Address: The mailing address and street address of Company is:	of the principal office of the Limited Lia	ability	
Principle Office Address:	Mailing Address:		
2401 - 72nd Street North Saint Petersburg, Florida 33710	2401 - 72nd Street North Saint Petersburg, Florida 33	710	
ARTICLE III - Registered Agent, Re The name and the Florida street address		Signature:	
The name and the Florida street address		•	
The name and the Florida street address	of the registered agent are:  Joseph R. Lindquist	05 F	

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, F.S.

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(CONTINUED)

# ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Vickie L. Lindguist
	6795 - 14th Street South
	Saint Petersburg, FL 33705
MGRM	Joseph R. Lindquist
	6795 - 14th Street South
	Saint Petersburg, FL 33705

#### ARTICLE V - Effective Date Of Organization:

The effective Date of Organization is: February 15, 2005.

**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.)

Typed or printed name of signee