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ANASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Sec Division of Corp				
SUBJECT: K	EZAAM LL	Liability Company)	MR 21 PM 1: 37 ALLHASSEE, FLORI	
	(Name of Limited	Liaomiy Company)	ASC P	
The enclosed Articles of Organization and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
TOMER TAGHART (Name of Person)				
	(1)	adile of Tersony		
	(F	Firm/Company)		
1225 BENNETT DRIVE STE 118				
LONGWOOD FL 32750 (City/State and Zip Code)				
For further information concerning this matter, please call:				
AMBER WEST at (408) 804-1500 (Area Code & Daytime Telephone Number)				
Enclosed is a check for	the following amount:			
\$125.00 Filing Fee	☐ \$130.00 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		MAILING ADDRESS: Registration Section		

Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

	<u></u>			
ARTICLES OF ORGANIZATION FOR FLO	ORIDA LIMITED LIABILITY COMPANY			
ARTICLE I - Name: The name of the Limited Liability Company is:	AND SEE SEE			
KEZAAM	LLC PROPERTY			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
Juite 118 Juite 118 Longwood, FL 32750	1225 Bennett Dr Suite 116 Longwood, FL 32750			
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:			
The name and the Florida street address of the registered agent are:				

TOMER TAGGART

Florida street address (P.O. Box NOT acceptable)

Longwood, FL 32750

City, 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, F.S..

(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" = Managing Member MAR Tomer Taggart 1043 Dunnitst (true) Longwood, FL 32 7 7 9

(Use attachment if necessary)

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)