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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TIRIAN-JEWEL, LLC,
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

V. Frederick Strawbridge
(Name of Person)

Waytime Phone # 863-646-9332
(Firm/Company)

5120 S. Lakeland Dr., Ste. 2
(Address)

Lakeland, FL 33813
(City/State and Zip Code)

For further information concerning this matter, please call:

Mary E. Taylor at (863) 648-4036
(Name of Person) (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
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TIRIAN-JEWEL, LLC

ARTICLE II - Address:

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

Principal Office Address:

5120 S. Lakeland Dr.

Ste. 2

Lakeland, FL 33813

Mailing Address:

5120 S. Lakeland Dr.

Ste. 2

Lakeland, FL 33813

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

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

V. Frederick Strawbridge

Name

5120 S. Lakeland Dr., Ste. 2

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

Lakeland, FL 33813

FL

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.

V. Frederick Strawbridge
Registered Agent's Signature

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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" = Managing Member

Name and Address:

MGR

V. Frederick Strawbridge

5120 S. Lakeland Dr., Ste. 2

Lakeland, FL 33813

MGRM

Dellynne C. Strawbridge

5202 Messina

Lakeland, FL 33813

MGRM

Vincent Frederick Strawbridge, Jr.

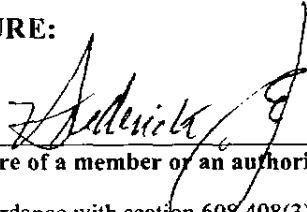
5202 Messina

Lakeland, FL 33813

(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.)

V. Frederick Strawbridge

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)

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TALLAHASSEE, FLORIDA

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TIRIAN-JEWEL LLC.

ADDENDUM – Articles of Organization
Managing Members, cont.

MGRM	William Lee Strawbridge 5130 Dorman Rd. Lakeland, FL 33813
MGRM	Benjamin Robert Strawbridge 1606 McKinney Ave. Lynchburg, VA 24502
MGRM	Stephen Paul Strawbridge 46 Morse Dr Flintstone, GA 30725
MGRM	Dellynne C. Strawbridge 5202 Messina Lakeland, FL 33813

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