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

From:  
Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES  
Account Number : I19980000007  
Phone : (407) 425-1020  
Fax Number : (407) 839-3635

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

HEIKE KNAUS, LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I – Name:**

The name of the Limited Liability Company is HEIKE KNAUS, LLC.

**ARTICLE II – Address:**

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

**Principal Office Address:**

5058 Brightmour Circle  
Orlando, FL 32837

**Mailing Address:**

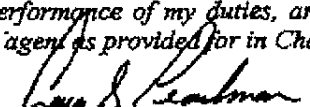
5058 Brightmour Circle  
Orlando, FL 32837

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

The name and Florida street address of registered agent are:

Craig S. Pearlman  
2 S. Orange Avenue, 5<sup>th</sup> Floor  
Orlando, FL 32801

*Having been named as registered agent and to accept service of process for the above state 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.*

  
Craig S. Pearlman, Registered Agent

**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

**MGRM****Name and Address:**

Heike Knaus  
5058 Brightmour Circle  
Orlando, FL 32837



Signature

Heike Knaus

Typed or printed name of signee

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