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2005 JUL 18 P 12: 5
2005 JUL 18 P 12: 14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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TALLAHASSEE, FLORIDA

(Requestor's Name)

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(City/State/Zip/Phone #)

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To: Florida Department of State
Registration Section
Division of Corporations

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From: Mr. & Mrs. Mark and Alicia Simat

2005 JUL 18 P 12:14

Date: July 14, 2005

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: Forming a Florida LLC

Enclosed please find our application and payment for forming a Florida LLC.

Please note for your records our name, address and daytime telephone. They are as follows:

Mr. & Mrs. Mark and Alicia Simat
11516 Savannah Lakes Drive
Parrish, Florida 34219

Daytime Phone Number: (941) 705-2755

Thank You.

TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

2005 JUL 18 P 12:14

SUBJECT: Simply Savannah, LLC SECRETARY OF STATE
(Name of Limited Liability Company) TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

Mr + Mrs. Mark + Alicia Simat
(Name of Person)

Simply Savannah, LLC
(Firm/Company)

11516 Savannah Lakes Drive
(Address)

Parrish, FL 34219
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Simat at (941) 705-2755
(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 12:14

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Simply Savannah, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

11516 Savannah Lakes Drive
Parrish, FL 34219

11516 Savannah Lakes Drive
Parrish, FL 34219

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

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

Mark
Name

Simat

11516 Savannah Lakes Drive
Florida street address (P.O. Box **NOT** acceptable)
Parrish FL 34219
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..

[Signature]
Registered Agent's Signature

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

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Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mgr

Mark Simat
11516 Savannah Lakes Drive
Parrish, FL 34219

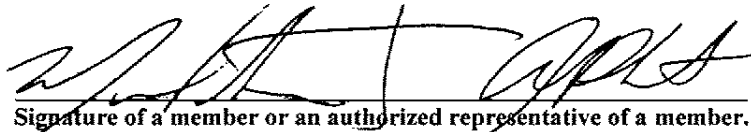
Mgr

Alicia Simat
11516 Savannah Lakes Drive
Parrish, FL 34219

(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.)

Mark Simat Alicia Simat
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)