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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KULZER CONSULTANCY, LLC (Name of Limited Liability Company)	25 (2) -6 P 2:02
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
iVAN K. CLEMENTS, JR., ESQUIRE (Name of Person)	
IVAN K. CLEMENTS, JR., P.A.	
(Firm/Company)	
540 West New York Avenue	
(Address)	
DeLand, Florida 32720	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
ivan K. Clements, Jr. at (386) 740-0037	
(Name of Person) (Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee	□ \$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 KULZER CONSULTANCY, LLC

265 58'-5 P 2:02

THE UNDERSIGNED MANAGING MEMBER, for the purpose of forming a Limited Liability Company under the laws of the State of Florida, hereby files these Articles of Organization for KULZER CONSULTANCY, LLC.

ARTICLE I. Name

The name of the Limited Liability Company is KULZER CONSULTANCY, LLC.

ARTICLE II. Address

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

Principal Office Address:

302 Eagles Eye Court New Smyrna Beach, Florida 32168

Mailing Address:

302 Eagles Eye Court New Smyrna Beach, Florida 32168

ARTICLE III. Registered Agent, Registered Office, & Registered Agent's Signature

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

LINDA A. KULZER 302 Eagles Eye Court New Smyrna Beach, Florida 32168

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.? 12

Linda A. Kulzer, Registered Agent's Signature

ARTICLE IV. Managing Member

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

Title:

"MGRM" = Managing Member

Name and Address:

JOHN F. KULZER

302 Eagles Eye Ct.

New Smyrna Beach, FL 32168

IN WITNESS WHEREOF, the undersigned, as Managing Member, has executed the foregoing Articles of Organization on the May of August, 2005.

STATE OF New York COUNTY OF Albar

BEFORE ME, a Notary Public, personally appeared JOHN F. KULZER, to me known to be the person described as Managing Member and who executed the foregoing Articles of Organization, and acknowledged before me that he subscribed to these Articles of Incorporation on the Articles of August, 2005.

(SEAL)

Notary Public Signature

Debrah L. Graut

Printed Notary Signature

My Commission Expires: 4//6/07

DEBORAH L. GRANT
Notary Public, State of New York
No. 01GR6057212
Qualified in Rensselaer County
Commission Expires April 16, 20