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

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

ed's mower shop, llc

AL

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

ED'S MOWER SHOP, 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:**
5440 McINTOSH RD	4040 MURDOCK AVE
SARASOTA FL 34233	SARASOTA FL 34231

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

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

SECURE BUSINESS SOLUTIONS, LLP, RODDOR POLIVCHAK
Name

4301 32ND ST W STE D3
Florida street address (P.O. Box NOT acceptable)

BRADENTON FL 34205
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.

RODDER POLIVCHAK
Registered Agent's Signature

(CONTINUED)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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
MGRM	GREGORY S. COLUMBUS 4040 MURDOCK AVE SARASOTA FL 34231
MGRM	DENISE A. COLUMBUS 4040 MURDOCK AVE SARASOTA FL 34231

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Denise Columbus

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.)

DENISE A. COLUMBUS

Typed or printed name of signer

Filing Fee:

$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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