

L05000102329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

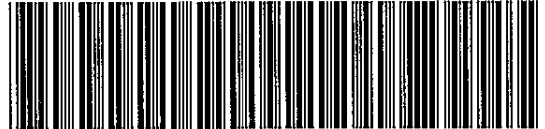
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500060524635

10/18/05--01003--002 \*\*155.00

FILED

05 OCT 17 AM 10:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

05 OCT 17 PM 3:04

FILE  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Excel4kids Learning, LLC*

**FILED**  
05 OCT 17 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

Courier

ARTICLES OF ORGANIZATION FOR  
EXCEL4KIDS LEARNING, LLC  
A FLORIDA LIMITED LIABILITY COMPANY

FILED  
OCT 17 2011  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is: **EXCEL4KIDS LEARNING, LLC**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: **809 E. Bloomingdale Avenue, Suite 302, Brandon, Florida 33511**

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Operating Agreement.**

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members. The names and addresses of the managing members are:

**Martin T. Northrop, Jr.**  
809 E. Bloomingdale Avenue  
Suite 302  
Brandon, Florida 33511

**Andrea E. Northrop**  
809 E. Bloomingdale Avenue  
Suite 302  
Brandon, Florida 33511

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**


The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: **Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.**

**ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS**

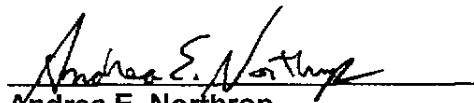
The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **Only with the consent of all the remaining Members.**

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing Members, by: **Martin T. Northrop, Jr. and Andrea E. Northrop.**

Dated this 3<sup>rd</sup> day of October, 2005.



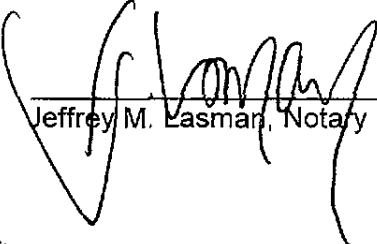
**Martin T. Northrop, Jr.**  
Managing Member

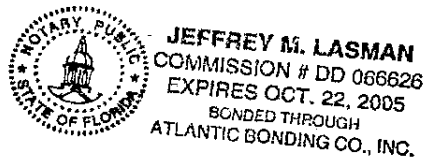


**Andrea E. Northrop**  
Managing Member

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 3<sup>rd</sup> day of October, 2005, by **Martin T. Northrop, Jr.** and **Andrea E. Northrop**, who have produced Florida Driver Licenses as identification.

  
\_\_\_\_\_  
Jeffrey M. Lasman, Notary Public



**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **EXCEL4KIDS LEARNING, LLC**
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire  
LASMAN LAW FIRM, P.A.  
6152 Delancey Station Street, Suite 205  
Riverview, Florida 33509**

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.

  
Jeffrey M. Lasman

October 3, 2005  
(Date)