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PICK-UP WAIT MAIL
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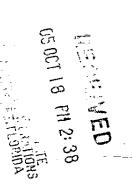
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COVER LETTER

TO: Registration Se Division of Co				
SUBJECT:	FSKAYE Inve	stments LLC d Liability Company)		-
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
Fredd	y Kaye	Name of Person)		
		Name of Person)	, , , , , , , , , , , , , , , , , , ,	·
	Additional Add	Firm/Company)		·
c 7 07	Widefield Rd			•
J_01_	ae) reto Na	(Address)		777 B.
Tallaha	assee, FL (City	32309		
 	(City	/State and Zip Code)		
For further information	concerning this matter, please	call:		
Freddy K	Cayp	at (<u>950</u>) <u>510-</u> (Area Code & Daytime To	3202	
/ (Namo	of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check for	or 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)	·
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
FSKAVE Investments LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
-5281 Widefield Rd 5281 Widefield Rd Tallahassee, FL 72309 Tallahassee, FL 32309
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Freddy Kaye Name 5281 Widefield Rd. Florida street address (P.O. Box NOT acceptable) Tallahassee FL 32309 City, State, and Zip
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32309 City, State, and Zip 55
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

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

"MGRM" = Manager "MGRM" = Manager "MGRM	Title:		Name and Address:	
MGRM Freddy Kaye \$2\$\$ widtfield Rd Tallahassee, FL \$2309 MGRM Susan Kaye \$2\$\$ Widefield Rd. Tallahassee, FL \$2309 (Use attachment if necessary) CLE V: Effective date, if other than the date of filing:				
MGRM Susan Kaye Susan Kaye		naging Member		
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:	MGRM		Freddy Kaye	
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:		· · · · · · · · · · · · · · · · · · ·	5281 Widefield Rd	· · · · · · · · · -
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:			Tallahassee, FL32309	
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:	MEDM		Sugar Kana	
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:	JVIOKI.		Det Widefield Rd	
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effective date is listed, the date must be specific and cannot be more than five business days prior 0 days after the date of filing.) 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.)	(The attackers	+ i6		• •
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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)