Florida Department of State

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To:

Division of Corporations

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From:

: RICHARD G. COKER, JR., P.A. Account Name

Account Number : I20010000145 Phone (954) 761-3636

Fax Number (954)761-1818

> M. Thomas JAN 06 2006

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Neighborhood Kids Afterschool Club, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

Neighborhood Kids Afterschool Club, LLC

ARTICLE II - Address

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

10651 West Oakland Park Blvd., Suprise, FL 33351.

ARTICLE III - Duration

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management (Check and complete the appropriate statement)

□ The Limited Liability Company is to be managed by a menager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

□ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Jacquelyn Murray, 10651 West Oakland Park Blvd., Sunrise, FL 33351

Lauric Fox, 10651 West Oakland Park Blvd., Sunrise, FL 33351

Signature of a member or authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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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:

(Signamure)

Neighborhood Kids Afterschool Club, LLC.

2. The name and address of the registered agent and office is:

Isoquelyn Muray
(Name)

10651 West Oakland Park Blvd.
(P.O. Box or Mail Drop Box NOT acceptable)

Sunrise, FL 33351 (City/State/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 statues 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.

Filing Fee: \$35.00 for Designation of Registered Agent

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