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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2006

ANNABELLE S. SCOLARO 447 BAKER ST. ORLANDO, FL 32806

SUBJECT: BOOK BUDDY, LLC BOOKADDY, LLC

Ref. Number: W06000005975

2006 MAR 14 MILL 16

BOOKADDY,

We have received your document for BOOK BUDDY, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 906A00008902

COVER LETTER

NAME: ANNABELLE S. SCOLARO

ADDRESS. 447 BAKER ST.

ORLANDO, FL 32806

PHONE:

407-423-2237 321-438-9175 (cell)

MAR 14 AM II: 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is: BookADDY, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 447 BAKER ST. ORLANDO, FL 32804 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are: ANNABELLE S. SCOLAR OB. H47 BAKER ST. Elorida street address (P.O. Box NOT acceptable) ORLANDO, FL 32806 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

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is. therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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.)

HNNABELLE S. SCOLARO
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)