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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Knowsis, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason B. Fisher

(Name of Person)

Knowsis, Inc.

(Firm/Company)

60 Tarpon Cir

(Address)

Winter Springs, FL 32708-4112

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason B. Fisher

(Name of Person)

at 407

574-7483

(Area Code & Daytime Telephone Number)

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Enclosed is a check for 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Knowsis, 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:**

80 Tarpon Circle
Winter Springs, FL 32708-4112

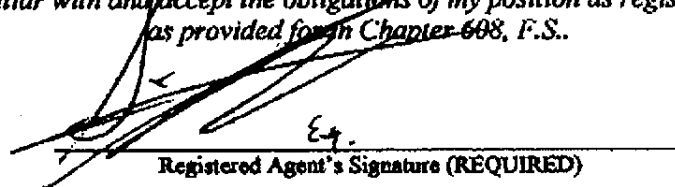
80 Tarpon Cir
Winter Springs, FL 32708-4112

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

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

Scott D. Widerman, Esq.
202 N Harbor City Blvd
Ste 200
Melbourne, FL 32935-7309

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..


Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:**Name and Address:**

"MGR" = Manager

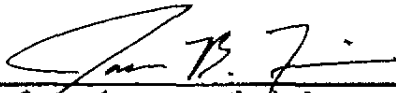
"MGRM" = Managing Member

MGRM

Knowsis, Inc.
80 Tarpon Cir
Winter Springs, FL 32708-4112

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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.)

Jason B. Fisher

Typed or printed name of signee

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