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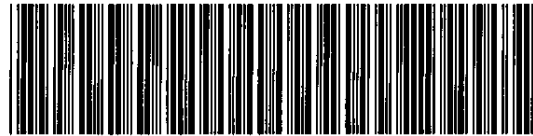
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CAPITAL CONNECTION, INC.

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

Linardatos Holdings, LLC

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- ☐ 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
- ☐ Courier

Signature _____

Requested by: *WLC*

Name

Date *9/13*

Time *9:00*

Walk-In

Will Pick Up

**ARTICLES OF ORGANIZATION
FOR
LINARDATOS HOLDINGS, L.L.C.**

We, the undersigned, as organizers of a limited liability company, under the Florida Limited Liability Company Act, adopt the following Articles of Organization for such limited liability company:

I. NAME

The name of the limited liability company is: **LINARDATOS HOLDINGS, L.L.C.**

II. TERM OF EXISTENCE

The limited liability company shall exist in perpetuity. The date and time of the commencement of the existence of the limited liability company shall be the time of filing of the Articles of Organization by the Department of State.

III. ADDRESS

The mailing address of the limited liability company is P.O. Box 510238, Key Colony Beach, Florida, 33051. The street address of the limited liability company is 35510 U.S. Highway 27, Haines City, Florida, 33844.

IV. INITIAL REGISTERED AGENT and ADDRESS

The initial registered agent of the limited liability company is:

IOANNIS LINARDATOS
3919 URBINO STREET
SEBRING, FL 33872

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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 all 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, Florida Statutes.


IOANNIS LINARDATOS

V. MEMBERS

The names and addresses of the members of the limited liability company are as follows:

IOANNIS LINARDATOS
3919 URBINO STREET
SEBRING, FL 33872

DIMITRIOS LINARDATOS
310 3RD STREET
KEY COLONY BEACH, FLORIDA 33051

No additional members shall be admitted unless all members shall unanimously agree, and on such terms and conditions as shall be agreed unanimously.

The death, retirement, resignation, expulsion, bankruptcy or dissolution of any member, or the occurrence of any event which terminates the continued membership of a member of this limited liability company, shall terminate this company, unless the remaining members shall unanimously agree to continue the business of the company, in which event, this company shall not terminate.

VI. MANAGEMENT

The management of the limited liability company is reserved to the members of the company. The power to amend, alter, adopt or repeal the regulations of this limited liability company shall be vested in the members of the limited liability company.

The name and address of the managing member is:

IOANNIS LINARDATOS
3919 URBINO STREET
SEBRING, FL 33872

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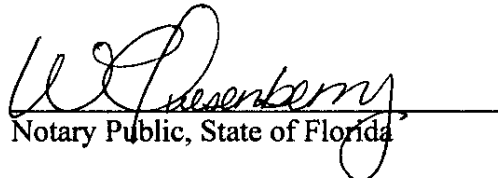

IOANNIS LINARDATOS


DIMITRIOS LINARDATOS

STATE OF FLORIDA
COUNTY OF Highlands

I HEREBY CERTIFY that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, IOANNIS LINARDATOS, to me known to be the individual described in and who executed the foregoing and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

IN WITNESS WHEREOF, I hereunto set my hand and official seal this 5th day of September, 2006. He is personally known to me or has produced Drivers License (FL) as identification.


Notary Public, State of Florida

My Commission Expires:

W. QUEISENBERRY
Notary Public, State of Florida
My Commission Expires March 23, 2009
Commission No. DD 410481

COUNTY OF MONROE

I HEREBY CERTIFY that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, DIMITRIOS LINARDATOS, to me known to be the individual described in and who executed the foregoing and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

IN WITNESS WHEREOF, I hereunto set my hand and official seal this 6 day of SEPTEMBER, 2006. He is personally known to me or has produced FLORIDA DRIVERS LICENSE as identification.

Deborah J. Morelli
Notary Public, State of Florida

My Commission Expires:

