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### COVER LETTER

	stration Se ion of Cor					
SUBJECT:	SAVAG	E CREATIONS, LLC	;			
•		(Name of Limite	d Liabil	ity Compa	iny)	
The enclosed a	Articles of	Organization and fee(s) are so	ubmitte	d for filing	<b>?</b> .	
Please return a	ill corresp	ondence concerning this matte	er to the	following	:	
TRIN	IA M. S	SZAFRAN				
		()	Name of	Person)		
SAV	AGE C	REATIONS, LLC				
		(	(Firm/Co	mpany)		
6848	SAN	DALWOOD DRIVE	=			
<del></del>		·	(Addr	ess)		
POF	RT RIC	HEY, FL 34668				
		(City)	/State an	d Zip Code	)	
For further inf	ormation o	concerning this matter, please	call:			
TRINA M.	SZAFF	RAN	at ( 72	27	243-326	1
	(Name	of Person)	(	(Area Code	& Daytime T	1 elephone Number)
Enclosed is a	check for	r the following amount:				
□ \$125.00 Fil	ing Fee	\$130.00 Filing Fee & Certificate of Status	Certi	fied Copy	ling Fee &	\$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		Registration Division of Clifton B 2661 Exe	ourier Address on Section of Corporatio uilding cutive Center ee, FL 32301	ns

## SFFECTIVE DATE

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
SAVAGE CREATIONS, LLC	
(Must end with the words "Limited Liability Company, "Limited	Company" on their obligation of LC" and C"
(wast end with the words Elithied Elability Company, Elithied	Company or their aboreviation LLC, or L.C.,
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6848 SANDALWOOD DRIVE	6848 SANDALWOOD DRIVE
PORT RICHEY, FL 34668	PORT RICHEY, FL 34668
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:  SECOLL AND AND ACCEPTABLE  ESS (P.O. Box NOT acceptable)  FI 34654
PENNY L. SZAFRAN	
Name	SSE
10070 CASEY DRIVE	me <del>de</del>
Florida street addr	ess (P.O. Box NOT acceptable)  FL 34654  FL 34654
NEW PORT RICHEY	FL 34654
City, State, an	J 7:-
511, 5111.C, 111.	u 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..

registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

"MGRM" = Managing Member  MGRM  TRINA M. SZAFRAN 6848 SANDALWOOD DRIVE PORT RICHEY, FL 34668  MGRM  C. MICHAEL FOURNIER 6700 KNIGHTSBRIDGE DRIVE NEW PORT RICHEY, FL 34653  (Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filling: JANUARY 1, 2007 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filling.)  REQUIRED SIGNATURE:  ALLAHASSELE ALLAHASSEL	<u>Title:</u>		Name and Address:			
MGRM  TRINA M. SZAFRAN 6848 SANDALWOOD DRIVE PORT RICHEY, FL 34668  MGRM  C. MICHAEL FOURNIER 6700 KNIGHTSBRIDGE DRIVE NEW PORT RICHEY, FL 34663  (Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing: JANUARY 1, 2007 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  REQUIRED SIGNATURE:						
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MGRM  C. MICHAEL FOURNIER 6700 KNIGHTSBRIDGE DRIVE NEW PORT RICHEY, FL 34663  (Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing: JANUARY 1, 2007 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  REQUIRED SIGNATURE:	MGRM		TRINA M. SZAFRAN			
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing: JANUARY 1, 2007 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  REQUIRED SIGNATURE:			6848 SANDALWOOD DRIVE	<del></del>		
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:  JANUARY 1, 2007 . (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  REQUIRED SIGNATURE:			PORT RICHEY, FL 34668			
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:  JANUARY 1, 2007 . (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  REQUIRED SIGNATURE:	MGRM		C. MICHAEL FOURNIER			
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(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  REQUIRED SIGNATURE:  ALAHASSE ALAHASSE TELEBRICA TELEBRI	(Ose attachmen	i ii necessary)				
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		Signature of a member of	r ap authorized representative of a member.	<u> </u>	$\mathbb{R}$	Ö
(In accordance with section 608.408(3), Florida Statutes, the execution		(In accordance with section	on 608.408(3). Florida Statutes, the execution	ب سا	=	
of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)		(in accordance with section	m over roots, r roman blackers, the execution	$\sim$		
$oldsymbol{ iny}$		of this document constitut	es an affirmation under the penalties of perjury	SE 1	<u>-</u>	
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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)