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Division of Corporations

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· : (850)205-0383

From:

Account Name

: A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247

Phone

(800) 494-3124

Fax Number

(305) 675-2811

2 Friends Folly, LLC

ORIDA/FOREIGN LIMITED LIABILITY CO.

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

2 Friends Folly, LLC

ARTICLE II ADDRESS

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

4314 SW 22 Street Ocala FL 34474

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

Kathryn Pasteur 4314 SW 22 Street Ocala FL 34474

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's signature / Kathryn Pasteur

<u>ARTICLE IV MANAGEMENT</u>

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

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ARTICLE Y

The name(s) and address(es) of the managing members of the LLC are:

Kathryn Pasteur

Managing Member: 4314 SW 22 Street

Ocala FL 34474

JIII Eason

Managing Member: 4503 NE 8 Street

Ocala FL 34470

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.)

Jill Eason Typed or printed name of signee