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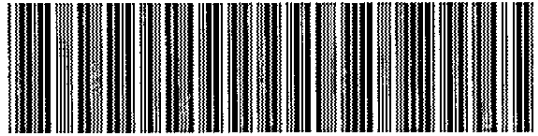
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TALLAHASSEE FLORIDA

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May 23, 2007

CORPORATION NAME (S) AND DOCUMENT NUMBER (S)

Tomkat Enterprises, LLC

Filing Evidence

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

ARTICLES OF ORGANIZATION
OF
TOMKAT ENTERPRISES, LLC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the limited liability company is *TOMKAT ENTERPRISES, LLC.*

ARTICLE II - ADDRESS


The mailing address and the street address of the principal office of the Limited Liability Company is P.O. Box 952946, Lake Mary, FL 32795 and 204 N. Elm Avenue, Sanford, FL 32771.

ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

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

Stephen H. Coover
230 North Park Avenue
Sanford, FL 32771

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 property and complete performance of my duties, and I am familiar with, and accepts the obligations of my position as registered agent as provided for in Chapter 608, F.S..



Registered Agent's Signature

ARTICLE IV - DURATION

The duration of the Limited Liability Company shall, unless limited by the terms of any Regulations Agreement, be perpetual.

ARTICLE V - MANAGER(S) OR MANAGING MEMBER(S):

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

Title:

Name and Address:

Manager

Kyle Kilger
1094 Henley Downs Place
Heathrow, FL 32746

Manager

Tami F. Kilger
1094 Henley Downs
Heathrow, FL 32746

Member

Thomas White
63 Crossway Drive
Deer Park, NY 11729

Member

Janice White
63 Crossway Drive
Deer Park, NY 11729


IN WITNESS WHEREOF, the undersigned, as a authorized subscriber, has executed the foregoing Articles of Organization on the 22nd day of May, 2007.


Stephen H. Coover, Subscriber

(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.)

STATE OF FLORIDA
COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 22nd day of May, 2007, by Stephen H. Coover who is personally known to me.


Notary Public - State of Florida

My Commission Expires:



Melinda J. Rinne
MY COMMISSION # DD215840 EXPIRES
June 19, 2007
BONDED THRU TROY FAIR INSURANCE, INC.