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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : FLORIDA INCORPORATORS, INC.  
Account Number : 075350000473  
Phone : (813) 632-7882  
Fax Number : (305) 402-3141

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

Treasure Cove Cafe LLC

*mst*

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**ARTICLES OF ORGANIZATION FOR**

**Treasure Cove LLC**

**A FLORIDA LIMITED LIABILITY COMPANY**

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**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Treasure Cove LLC**

**ARTICLE II - Mailing and Street Address:**

The mailing and street address of the Limited Liability Company is:

**Treasure Cove LLC  
8349 Forest Oaks Blvd  
Spring Hill, FL 34606**

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

**30 years**

FLORIDA INCORPORATORS, INC.  
8875 Hidden River Pkwy, Ste 300 1  
Tampa, FL 33637  
(813) 632-7882

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**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by its members who shall be empowered to act on behalf of the Limited Liability Company, and the names and addresses of the Managing Members are:

Tammy Graczyk  
8349 Forest Oaks Blvd  
Spring Hill, FL 34606

Managing Member

Fredrick Russell  
136 Commercial Way  
Spring Hill, FL 34606

Managing Member

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

The remaining members may admit additional members upon the majority vote of the remaining members consenting to the admission of the additional member.

**ARTICLE VI - Members Rights to Continue Business:**

The right of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The remaining members have the right to continue the business on the death, retirement, resignation,

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expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company upon the majority vote of the remaining members.

**ARTICLE VII - Registered Agent:**

The initial registered agent and registered office of the limited liability company shall be:

Tammy Graczyk  
8349 Forest Oaks Blvd  
Spring Hill, FL 34606

DATED: November 16, 2007

  
Tammy Graczyk  
Authorized Representative

**ACCEPTANCE OF REGISTERED AGENT**

I hereby declare I am familiar with and accept the duties and responsibilities as registered agent of the limited liability company.

  
Tammy Graczyk

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