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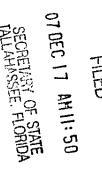
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Special Instructions to Filing Officer:	
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT. 3 Eggs, LLC		
SUBJI	(Name of Limited Liability Company)		·
	•		
The en	nclosed Articles of Organization and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	(Name of Person)		
	Schultz & Associates, PLLC		
	(Firm/Company)	PER	07 DEC 17 AM 11:50
	6004 Brownsboro Park Blvd., Ste. B	图	55
,	(Address)		~~ .
	Louisville, KY 40207	끄유	宝
	(City/State and Zip Code)		5
		Su.	
For furt	ther information concerning this matter, please call:		
	(Name of Person) at () (Area Code & Daytime Telephone Number)	-	
	sed is a check for the following amount:		
✓ \$125.0	00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing I \\ Certificate of Status Certified Copy Certificate of St \\ (additional copy is enclosed) Certified Copy \\ (additional copy is	atus &	·
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
3 Eggs, LLC (Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
52 Riley Road #346, Celebration, FL 34747	52 Riley Road #346, Celebration, FL 34747
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Richard S. Troutman	
52 Riley Road #346	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Celebration,	_{FL} 34747
City, State, a	nd 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)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
Richard S. Troutman - MGRM	8509 Running Spring Drive	
	Louisville, KY 40241	
Hoon Baik - MGRM	3509 Coventry Tee Court	
	Louisville, KY 40241	0
	——————————————————————————————————————	7 DEC 1
John McCall - MGRM	52 Riley Road #346 全语	<u> </u>
	Celebration, FL 34747	
		a B
<u> </u>		2
		Ħ
(Use attachment if necessary)		
RTICLE V: Effective date, if other than	n the date of filing: (OPTIONAL) ast be specific and cannot be more than five business days p	rior
or 90 days after the date of filing.)	ist be specific and cannot be more than five business days p	1101
• -		
DECHIDED SIGNATURE.	·	
REQUIRED SIGNATURE:		
· ·	i a C + +	
Signature of a ma	ember or an authorized representative of a member.	
•		
of this document c	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)	
	CITAD S. TRUIT MAJ. Typed or printed name of signee	
,	. Typed or printed name of signee	

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)