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SECRETARY OF STATE
TALLAHASSEE FLORID.

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Subedu's, L.L.C.	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Susan K. Burdick	
(Name of Person)	
Subedu's, L.L.C.	
(Firm/Company)	
1100 Crystal Lake Dr. #204	
(Address)	
Pompano Beach, FL 33064	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Susan Burdick (Name of Person) at (954) (Area Code & Daytime Telephono Number)	00
Enclosed is a check for the following amount:	
**S125.00 Filing Fee ** Certificate of Status Certified Copy (additional copy is enclosed) **Certificate of Status Certified Copy (additional copy is enclosed) **Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	:	
Subedu's, L.L.C.		·
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	rincipal office of the Limited Lial	bility Company is:
Principal Office Address:	Mailing Address:	
1100 Crystal Lake Dr. # 204	1100 Crystal Lake Dr. # 204	
Pompano Beach, FL 33084	Pompano Beach, FL 33064	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)		
The name and the Florida street address of the	registered agent are:	7 DEC
Susan K. Burdick		TARY HASSE
Name		SE S
1100 Crystal Lake D	Dr. #204	PR ST
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)	I: 42 STATE STATE
Pompano Beach, FL	_ 33064	2 PA
City, State,	and 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:

"MGR" = Man	ager	Name and Address:		
	anaging Member			
MGR		Susan K. Burdick		
		1100 Crystal Lake Dr. #204		
		Pompano Beach, FL 33064		
		ı		
				<u></u>

(Use attachmer	t if necessary)			·
	• ,	date of filing:	. (OP	TIONAL)
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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)