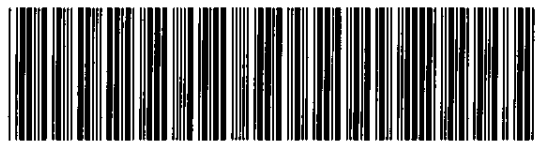


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01/06/09--01023--001 **155.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. BRYAN

JAN -7 2009

EXAMINER

TAX MARSHALLS, INC.

*P.O. Box 496148
Port Charlotte, FL 33949-6148*

Paul G. Marshall, Manager

941 639 1100

July 9, 2008

*Florida Department of State
Division of Corporations
P.O. Box 6327*

Tallahassee, Florida 32314

Dear Gentlepersons:

I am enclosing Articles of Organizationn for the following new corporation:

MRS.C'S EDUCATIONAL RESOURCES, LLC

A check in the amount of \$155.00 is also enclosed to cover the costs for the corporation to file.

*Please call me at the phone number shown above if there are any problems.
Send certified copy to:*

*Mr. Paul G. Marshall
P.O. Box 496148
Port Charlotte, Florida 33949-6148*

Thank you very much.

Sincerely,


PAUL G MARSHALL

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SECRETARY OF CORPORATIONS
09 JAN - 6 PM 4:01

**ARTICLES OF ORGANIZATION
FOR
MRS C's EDUCATIONAL RESOURCES, LLC.**

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
09 JAN -6 PM 4:01

**ARTICLE I
NAME**

The name of the Limited Liability Company is: MRS C's EDUCATIONAL RESOURCES, LLC.

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is as follows:

Principal Office Address:

160 Appian Street
Port Charlotte, Florida 33954

Mailing Address:

160 Appian Street
Port Charlotte, Florida 33954

**ARTICLE III
REGISTERED AGENT and REGISTERED OFFICE**

The name and Florida street address of the Registered Agent are:

RAYMOND J. COSTA
160 Appian Street
Port Charlotte, Florida 33954

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.


RAYMOND J. COSTA, Registered Agent

**ARTICLE IV
MANAGERS/MANAGING MEMBERS**

MGRM

KATHLEEN M. COSTA
160 Appian Street, Port Charlotte, Florida 33954

MGRM

RAYMOND J. COSTA
160 Appian Street, Port Charlotte, Florida 33954


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DIVISION OF CORPORATIONS
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**ARTICLE V
EFFECTIVE DATE**

The effective date is: _____

(If other than the date of filing, the date must be specific and cannot be more than 5 business days prior to or 90 days after the date of filing.)


KATHLEEN M. COSTA
Managing Member


RAYMOND J. COSTA
Managing Member