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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
 Account Number : 072450003255
 Phone : (305) 634-3694
 Fax Number : (305) 633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

EESTOK, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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EXAMINER

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**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is EESTOK, LLC.

ARTICLE II - ADDRESS

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

8825 SW 129 STREET
MIAMI, FL 33176

ARTICLE III MANAGEMENT

The Limited Liability Company is to be managed by the members and the names and addresses of the Managing Members are:

MICHAEL STOKLOSA
8825 SW 129 STREET
MIAMI, FL 33176

ELENA EVANS
8825 SW 129 STREET
MIAMI, FL 33176

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ARTICLE IV- MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, 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 by unanimous consent of all the members.

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 by unanimous consent of the members.

ARTICLE VI - DURATION

The period of duration for the Limited Liability Company shall be until July 20, 2068.

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ARTICLE VII -- MEMBERSHIP CONTRIBUTION

The undersigned member or authorized representative of EESTOK, LLC. Deposits and says:

1. the above named limited liability company has at least two members;
2. the total amount of cash contributed by the member(s) is \$1,000.00;
3. if any, the agreed value of property other than cash contributed by member(s) is \$0. A description of the property is attached and made a part hereto.
4. the total amount of cash or property anticipated to be contributed by member(s) is \$1,000. This total includes amounts from 2 and 3 above.



Signature of member authorized or representative of a member. NAME: MICHAEL STOKLOSA

(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.)

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF CHAPTER 608, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is EESTOK, LLC.
2. The name and address of the registered agent and office is:


MICHAEL STOKLOSA
 8825 SW 129 STREET
 MIAMI, FL 33176

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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.



 Signature: MICHAEL STOKLOSA



 Date

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