Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)617-6383

MAR 11 2009

EXAMINER

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 : (800)494-3124 Phone

Fax Number

: (561)455~9885

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Sandra Allison Enterprises LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 508 and/or 621,F.S.

ARTICLE I

The name of the Limited Liability Company is:

SANDRA ALLISON ENTERPRISES LLC

ARTICLE II **ADDRESS**

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

342 TERRANOVA BVLD

WINTER HAVEN, FLORIDA 33881

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

A1A REGISTERED AGENT INC. 5647 110TH AVENUE NORTH ROYAL PALM BEACH, FLORIDA 33411

Having been named as registered agent 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 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.

A1A REGISTERED AGENT INC. / Registered Agent's signature

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SANDRA ALLISON ENTERPRISES LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
SANDRA ALLISON
342 TERRANOVA BVLD
WINTER HAVEN, FLORIDA 33881

x 55/1030c

Signature of a member or an authorized representative of a member (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.

SANDRA ALLISON

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