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Account Name : BUSINESS FILINGS
Account Number : 105256001620
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Kneading Hands LLC

Certificate of Status	0
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EXAMINER

FAX AUDIT # H090002376703

**ARTICLES OF ORGANIZATION
OF
Kneading Hands LLC**

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ARTICLE I NAME

The name of the limited liability company shall be: Kneading Hands LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
3387 East Bay Drive, Suite 3-4, Largo, Florida 33771.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Smruti Abhyankar, 3387 East Bay Drive, Suite 3-4, Largo, Florida 33771. Located in the County of Pinellas.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Smruti Abhyankar, 3387 East Bay Drive, Suite 3-4, Largo, Florida 33771



Date: October 27, 2009

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717

(608) 827-5300

FAX AUDIT # H090002376703

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE
UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Kneading Hands LLC

The name and address of the registered agent and office is Smruti Abhyankar, 3387 East Bay Drive,
Suite 3-4, Largo, Florida 33771. Located in the County of Pinellas.

Having been named as registered agent and to accept service of process for the above stated
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: Smruti Abhyankar
Smruti Abhyankar

Date: 10-30-09

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