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FLORIDA LIMITED LIABILITY CO.
Philka, LLC

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EXAMINER

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**ARTICLES OF ORGANIZATION OF
PHILKA, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certify:

ARTICLE I — Name

The name of the Limited Liability Company is: PHILKA, LLC.

ARTICLE II — Address

The mailing address and address of the principal office of the Limited Liability Company is:
12837 Madison Pointe Circle, #102, Orlando, Florida 32821

ARTICLE III — Registered Agent, Registered Office

The name and the street address of the initial registered agent are: Donna L. Draves, 120 East Concord Street, Orlando, Florida 32801.

ARTICLE IV — Management

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The names and address of the initial managing members of the Company are:

Philippe Hertrich, 12837 Madison Pointe Circle, #102, Orlando, Florida 32821
Karin Hertrich, 12837 Madison Pointe Circle, #102, Orlando Florida 32821

ARTICLE V — Effective Date; Existence


This company shall exist perpetually, commencing on March 26, 2010.

ARTICLE VI — Additional Provisions

Any Operating Agreement (as defined in Section 608.402(24) of the "Florida Limited Liability Company Act") relating to this Limited Liability Company must be in writing and signed by all of the members.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledge them to be my act this 26th day of March 2010.


Philippe Hertrich


Karin Hertrich

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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated Limited Liability Company at the place designated in this statement. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties. I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

REGISTERED AGENT:


DONNA L. DRAVES, ESQ.

STATE OF FLORIDA
COUNTY OF ORANGE

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Donna L. Draves, personally known to me, and who executed the foregoing Statement Accepting Appointment as Registered Agent and acknowledged before me that she executed the same.

WITNESS my hand and official seal this 26th day of March, 2010.



DALE E. MACMAHAN
MY COMMISSION # DD 853417
EXPIRES: March 20, 2013
Bonded Thru Budget Notary Services


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