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EFFECTIVE DATE 1/2/2011

10 DEC 17 AM ID: D2

B. KOHR

DEC 2 1 2010

EXAMINER

COVER LETTER

EFFECTIVE DATE 1/12/2011

| Division of Corporation | ons | | |
|----------------------------------|---|--|---|
| · SUBJECT: Ogre | Name of Limited | | 10 DEC 17 PM 10: 05 |
| O | Name of Limited | Liability Company | OEC |
| The enclosed Articles of Organiz | zation and fee(s) are sub | omitted for filing. | |
| Please return all correspondence | concerning this matter | to the following: | (A) |
| Robert? | Herres & J | Till Bunin ame of Person | · · · · · · · · · · · · · · · · · · · |
| | grewnn | (ter/Company | |
| | Auburn St | # 2 Address | |
| Lar | 80, F. 33 | | |
| - Oreb | · | Mail.Com filture annual report notification | |
| For further information concerni | ng this matter, please ca | all: | |
| Jill Brain Name of Person | a | t (<u>305</u>) <u>206</u> Area Code & Daytime Te | 2 Selephone Number |
| Enclosed is a check for the fo | llowing amount: | | |
| \$125.00 Filing Fee \$130. Certi | 00 Filing Fee & fiscate of Status | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Regist Divisi P.O. E | ng Address tration Section on of Corporations Box 6327 tassee, FL 32314 | Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301 | ons · Circle |

EFFECTIVE DATE 1/12/2011

| ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABII | LITY COMPANY |
|---|--|
| ARTICLE I - Name: The name of the Limited Liability Company is: | 10 DEC 17 |
| Ogrebunny LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") | |
| (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") | ĮĢ. |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited I. | Sciability Company is: |
| Principal Office Address: Mailing Address: | |
| 200 Aburn St # 2 200 Aburn St : Largo FL 33770 Largo FL , 337 | #2 70 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an indibusiness entity with an active Florida registration.) | |
| The name and the Florida street address of the registered agent are: | |
| Robert Herres | |
| Florida street address (P.O. Box NOT acceptable) | |
| Largo FL 33770 City, State, and Zip | |
| Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept to registered agent and agree to act in this capacity. I further agree to comply with statutes relating to the proper and complete performance of my duties, and I accept the obligations of my position as registered agent as provided for in | the appointment as th the provisions of all um familiar with and |
| Registered Agent's Signature (REQUIRED) | |
| | |

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

| . Title: "MGR" = Manager "MGRM" = Managing Membe | Name and Address: |
|---|--|
| MGR | Robert Herres 200 Auburn St # 2 Largo Fr 33770 |
| MGR | Jill Bunin 200 Alburn St #2 Largo Fe 33770 |
| | |
| (Use attachment if necessary) ARTICLE V: Effective date, if other the listed, the date is to or 90 days after the date of filing.) | han the date of filing: |
| REQUIRED SIGNATURE: | |
| Signature of a | pember or an authorized representative of a member. |
| (In accordance with sec constitutes an affirmation I am aware that any fals | tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.) |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Till Gunin
Typed or printed name of signee