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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO:

Registration Section

| Division of Co. | rporations | |
|-------------------------------------|---|---|
| SUBJECT. Sipre | ss Investments | s LLC |
| SUBJECT: SUPLEM | · · · · · · · · · · · · · · · · · · · | ted Liability Company |
| | | |
| The enclosed Articles of | Organization and fee(s) are | submitted for filing. |
| Please return all correspondent | ondence concerning this man | tter to the following: |
| Stephani | e Y. Morris | |
| | | Name of Person |
| Sipress | Investments Li | LC |
| | | Firm/Company |
| 7541 NV | V 20th Court | |
| | | Address |
| Sunrise, FL | 33313 | |
| | · · · · · · · · · · · · · · · · · · · | ty/State and Zip Code |
| sipressinve | stments@gmail.co | for future annual report notification) |
| For further information of | concerning this matter, pleas | • |
| | - | |
| Stephanie Y. Morris Name of Person | | at (754 <u>246-6035</u> Area Code & Daytime Telephone Number |
| , vaine c | , i ciscii | The Code & Baytime Pelephone Number |
| Enclosed is a check for | r the following amount: | |
| \$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:



Sipress Investments LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

| Principal Office Address: | Mailing Address: | | | |
|--|---|-------------------|--|--|
| 7541 NW 20th Court | 7541 NW 20th Court | | | |
| Sunrise, FL 33313 | Sunrise, FL 33313 | Sunrise, FL 33313 | | |
| ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address | own Registered Agent. You must designate an indi- | | | |
| Stephanie Y. M | 1orris | E SE F | | |
| | Name | 瑟 5 戸 | | |
| 7541 NW 2 | 20th Court | SER REL | | |
| Florida | street address (P.O. Box NOT acceptable) | 70 4 | | |
| Sunrise | _{FL} 33313 | | | |
| | City, State, and Zip | | | |

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 as provided for in Chapter 608, F.S..

(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: | Name and Address: | |
|--------------------------|---------------------|---|
| "MGR" = Manager | | |
| "MGRM" = Managing Member | | |
| MGR | Stephanie Y. Morris | |
| | 7541 NW 20th Court | _ |
| | Sunrise, FL 33313 | _ |
| MGRM | Jarrod L. Morris | |
| | | _ |
| | 7541 NW 20th Court | _ |
| | Sunrise, FL 33313 | |
| | | |
| | | _ |
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| | | |
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 1, 2012 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Stephanie Y. Morris

Typed or printed name of signee

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)