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Certified Copies _____ Certificates of Status _____

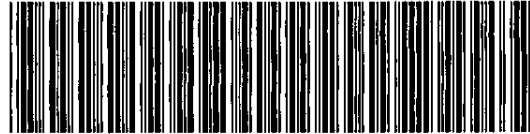
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GNATS LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Phyllis E. Harmon

Name of Person

Firm/Company

561 86th Terrace North

Address

St. Petersburg, FL 33702

City/State and Zip Code

cshutchison@cox.net

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Carolyn Hutchison

Name of Person

at (949)

500-0893

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☒ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L12000012195
FILED 8:00 AM
January 26, 2012
Sec. Of State
thampton

Article I

The name of the Limited Liability Company is:

GNATS LLC

Article II

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

604 87TH AVENUE NORTH
ST PETERSBURG, FL. 33702

The mailing address of the Limited Liability Company is:

604 87TH AVENUE NORTH
ST PETERSBURG, FL. 33702

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

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

MARY MARLER
415 87TH AVENUE NORTH
ST PETERSBURG, FL. 33702

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.

Registered Agent Signature: MARY MARLER

Article V

The name and address of managing members/managers are:

Title: MGRM
PHYLLIS E HARMON
8624 4TH STREET NORTH
ST PETERSBURG, FL. 33702

L12000012195
FILED 8:00 AM
January 26, 2012
Sec. Of State
thampton

Article VI

The effective date for this Limited Liability Company shall be:

02/01/2012

Signature of member or an authorized representative of a member

Electronic Signature: PHYLLIS E HARMON

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.