Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000126292 3)))



	will generate another cover sheet.	<u> </u>	<u> </u>
To:	Division of Corporations Fax Number : (850)617-6383	RETART OF	MAY -8 AM
From:	Account Name : LAZARUS CORPORATE FILING SERVICE, Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)220-1440	FLORDA	8:26
ann	the email address for this business entity to be used ual report mailings. Enter only one email address ple		ıre
ann	TLORIDA LIMITED LIABILITY CO.		ıre
ann	PLORIDA LIMITED LIABILITY CO. SMART STARTS AT ST. JOHN LLC		ıre
enni STATE COMIDA	TLORIDA LIMITED LIABILITY CO.		ııre
ann	FLORIDA LIMITED LIABILITY CO. SMART STARTS AT ST. JOHN LLC Ccrtificate of Status 1		ire

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H12000126292

12 MAY -8 AM 8: 26

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company Is:

Smart STARTS OF ST. John LLC

(Must lend 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:

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2418	W	Swar	n	AVE
	_			

7990 SW 1177 AVE SUITE 210

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

School House Investments LLC

Name

7990 SW 117 TH AVE STE 210

Florida street address (P.O. Box NOT acceptable)

Miami FL 33183

Mailing Address:

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

Name and Address:

"MGR" = Manager	
"MGRM" = Managing Member	•
MGRM	School House INVESTMENTS LLC 1990 SW 117TH AVE STE 210 MIAMI FL 33183
	<u>-</u> .
(Use attachment if necessary)	
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	date of filing: (OPTIONAL)
to or 90 days after the date of filing.)	e specific and cannot be more than five business days prior
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Signature of a member	
	o <u></u> ₩
constitutes an affirmation unde	8.408(3), Florida Statutes, the execution of this doctified.
I am aware that any false infor- constitutes a third degree felon	mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)/
ALEIANDO	o Garcia /school House Investments
	vped or printed name of signee

Page 2 of 2