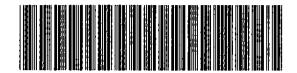
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE

RECEIVED

SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

D. BRUCE

NOV 1 4 2012

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

KWIG,LLC						
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				Art of Inc. File		
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				Fictitious Name File	-	
				Trade/Service Mark	-	
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				Dissolution / Withdrawal		
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Requested by: Seth	11/13/12	PM		UCC 1 or 3 File		
Name	Date	Time	—	UCC 11 Search		
				UCC 11 Retrieval		
Walk-In	Will Pick Up	·		Courier		

ARTICLES OF ORGANIZATION OF KWIG, LLC

The undersigned, being a natural person of at least 18 years of age and acting as the Organizer of the Limited Liability Company hereby being formed under the Chapter 608 of the Florida Statutes, does hereby adopt the following Articles of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is:

KWIG, LLC

SECOND: The term of existence of the Limited Liability Company shall be perpetual.

THIRD: The Limited Liability Company is organized to engage in and do any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company may be organized in accordance with the Chapter 608 of the Florida Statutes, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FOURTH: The mailing address and street address of the initial registered office of the Limited Liability Company in Florida is 3759 S.E. Upper Street, Stuart, Florida 34997, and the name of the initial registered agent of the Limited Liability Company to whom process may be sent in Florida at that address is GAYLE ADARE LAMB.

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. If 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.

print:

GAYLE ADARE LAMB

FIFTH: The mailing address and principal office of the Limited Liability Company is 3759 S.E. Upper Street, Stuart, Florida 34997.

SIXTH: The Limited Liability Company will be operated by the Members, and no manager will be appointed. The name and address of the sole Member are: GAYLE ADARE LAMB, having an address at 3759 S.E. Upper Street, Stuart, Florida 34997.

APPROYEL AND FILED SEVENTH: The total amount of cash (and a description and agreed value of any property other than cash) contributed to the Limited Liability Company, as capital, by the sole Member is \$100.00. The allocations and distributions of the Limited Liability Company shall be made in proportion to the Members' Percentage Interests.

EIGHTH: Additional capital contributions may be made at such times and in such amounts as may hereafter may be agreed by the unanimous vote of the Members. No additional capital contributions have been agreed to by the Members at this time.

NINTH: The existing Members shall have the right to admit additional Members to the Limited Liability Company, by the unanimous vote or consent of the Members.

TENTH: If there later are more than one Members, the remaining Members of the Limited Liability Company, by the unanimous vote or consent of the Members (other than the Member who caused the Withdrawal Event), may continue the Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a Member in the Limited Liability Company.

ELEVENTH: The name and business address of the Organizer of the Limited Liability Company are: GAYLE ADARE LAMB, having an address at 3759 S.E. Upper Street, Stuart, Florida 34997.

IN WITNESS WHEREOF, the undersigned has executed and acknowledged these Articles of Organization on November 6, 2012.

nrint

GAYLE ADARE LAMB

Organizer

Return to:

Leonard Rutland, Esquire 759 South Federal Highway, Suite 218 Stuart, Florida 34994 12 NOV 13 PM 1: 15
SEURETARY OF STATE
TAIL ANA SSEE FLOOR

STATE OF FLORIDA, COUNTY OF MARTIN, ss.

The foregoing instrument was acknowledged before me on the November, 2012, by GAYLE ADARE LAMB.

day of

GINA C. JORDAN Notary Public - State of Florida
My Comm. Expires Aug 22, 2014 Commission # EE 19764

print: (O) (Notary Public

My commission expires on 8-3>-1

Personally Known ____ OR Produced Identification <u>~____</u>
Type of Identification Produced: [] Passport [] State Driver's License [] Other:

FILED
12 NOV 13 PM 1: 15