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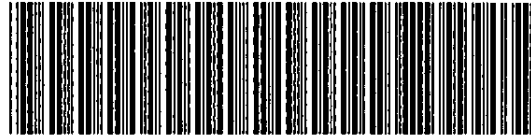
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ESL L.L.C.
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Elizabeth Gannon, ESQ.
(Name of Person)

(Firm/Company)

15604 County Line Rd
(Address)
Spring Hill FL 34610
(City/State and Zip Code)

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For further information concerning this matter, please call:

Elizabeth Gannon, ESQ. at (352) 279-1641
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate 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)

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: ESL L.L.C.

ARTICLE II- Address:

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

PRINCIPAL OFFICE ADDRESS:

15604 COUNTY LINE ROAD
SPRING HILL, FL 34610

MAILING ADDRESS:

15604 COUNTY LINE ROAD
SPRING HILL, FL 34610

ARTICLE III- Purpose:

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

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV: Registered Agent, Registered Office, & Registered Agent's Signature:

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

Elizabeth Gannon, Esq.
15604 County Line Road
Spring Hill, FL 34610

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.


Elizabeth Gannon Registered Agent

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ARTICLE V- Manager(s) or Managing Member(s):

The name of the address of each Manager or Managing Member is as follows:

"MGR" = Manager MGRM" = Managing Member

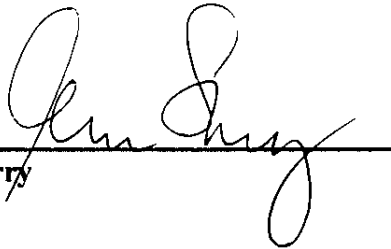
Title: Name and Address:

MGR Ellen Sherry

MGRM Steven Sherry

MGRM Lindsey Sherry

(In accordance with section 608.408(3), Florida Statute, 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.)


Ellen Sherry