

(Requestor's Name)			
(Address)			
(Address)	<u> </u>		
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)	···-		
(Document Number)			
Certified Copies Certificates of Status	s		
Special Instructions to Filing Officer:			
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T. Buren DES 3.02013.

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/27/13

NAME: KEY READS LLC

TYPE OF FILING: ARTICLES

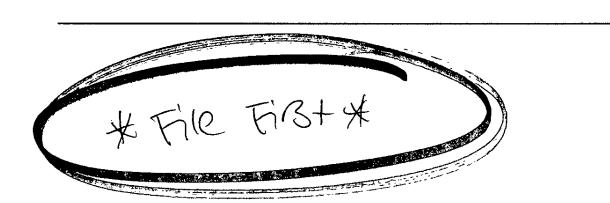
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Key Reads LLC		
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:		
Roberston Price		
Name of Person		
Key Reads LLC		
Firm/Company		
1508 Bay Road, Suite 1419		
Address		
Miami Beach, Florida 33139		
City/State and Zip Code rob@keyreactions.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Ronnie Roy 310 295-1296		
Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)}		
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6227Clibra Publisher		

P.O. Box 6327 Tallahassee, FL 32314

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 i	s:	
Key Reads LLC		
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	
1508 Bay Road, Suite 1419	1508 Bay Road, Suite 1419	
Miami Beach, Florida 33139	Miami Beach, Florida 33139	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the Robertson Price	e registered agent are:	13 DEC 27 PI
1508 Bay Road, Suite 14	19	FLOOR TO
	ddress (P.O. Box NOT acceptable)	4 IZ: 29 FLORIDA
	State, and Zip	
	Contraction of the second of t	I amanda di Pada di

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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGR Robertson Price 1508 Bay Road, Suite 1419 Miami Beach, Florida 33139 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filling: (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 filling.)

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.)

Robertson Price
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)