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EFFECTIVE DATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: From Industries 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:
Kun Cao
Name of Person
From Industries
Firm/Company
1921 Benjamin Chaires Road
Address
TALLAHASSEE, Flori JA. 32317 City/State and Zin Code
City/Diate and Lip Code
Chas rysauy @ yahvo. Com E-mail address: (to be used for future annual report notification)
É-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Charles T. Rysavy at (850) 544-3578 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \ \text{Certified Copy} \ (additional copy is enclosed) \ \text{Certified Copy} \ (additional copy is enclosed) \ \text{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:	
From Industries LLC.	
(Must end 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	ne Limited Liability Company is:
Principal Office Address: Maili	ng Address:
1921 Benjamin Chaires Road 192 TALLAHASSEE, HOURA. 32317 TAL	RI BENJAMIN CHAIRES ROAD
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are Charles T. Rysav	Y
1921 Benjamin Chair	coeptable)
Florida street address (P.O. Box NOT ad	
TAllah ASSEE FL City	
Having been named as registered agent and to accept service of p the place designated in this certificate, I hereby accept the app capacity. I further agree to comply with the provisions of all stat of my duties, and I am familiar with and accept the obligations Chapter 605, I Registered Agent's Signature (RE	ointment as registered agent and agree to act in this tutes relating to the proper and complete performance of my position as registered agent as provided for in F.S
(CONTINUED)	

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	K of Can
AMBR	1921 BENTAMIN Chaires Road
	TALIANASS ee, Florida. 32317
20	1 -0
MGR	Charles I. KYSAVY
	1921 Ben Jamin Chaires Road
	(HILLAMAS) EE, MOLLAMA, SUSTI
(Lies attachment if necessary)	
TO USE ATTACHORDED TO DECESSORY!	
(Use attachment if necessary) LE V: Effective date, if other than the date fective date is listed, the date must be specified.	of filing: Ari/1, 2014 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
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ARTICLE IV-