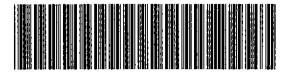
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(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

APR 23 AMII: 28

RETARY OF STATE

APR 2 8 2013 T. HAMPTON

COVER LETTER

TO:	Registration Division of	s Section Corporations		
SUBJI	ECT: <u>LyKey</u>	Property Work LLC Name of Lin	mited Liability Company	··········
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	natter to the following:	
	Randali	Lycke	Name of Person	
	<u>LyKey P</u>	roperty Work LLC	Firm/Company	
	<u>17215 B</u>	onita Lane East		
			Address	
	Sugarloa	of Key, FL 33042	City/State and Zip Code	
.R	ACEFANL@)	AHOO.COM E-mail address: (to be use	d for future annual report notifica	ation)
For fur	ther information	on concerning this matter, ple	ase call:	
Randa	all Lycke Nar	ne of Person	941) 405-6730 Area Code Daytime Te	lephone Number
Enclos	ed is a check fo	or the following amount:		
₫ \$125.0	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)
	<u>Ma</u>	iling Address	Street/Courier Add	res <u>s</u>

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:				
LyKey Property Work LLC (Must end with the words "Limited	Liability Company, "L.L.C.," or "L	LC.")		
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Compa	ıny is:		
Principal Office Address:	Mailing Address:			
17215 Bonita Lane East Sugarloaf Key, FL 33042	17215 Bonita Lane East Sugarloaf Key. FL 33042		 	
ARTICLE III - Registered Agent, Registered Office, of (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration). The name and the Florida street address of the registered	Registered Agent. You must design n.)	ate an indi	vidual (or
	agont are.			
Randall Lycke Name	· · · · · · · · · · · · · · · · · · ·			
17215 Bonita Lane East Florida street address (P.O. Box	NOT acceptable)			
Sugarloaf Key City	FL 33042 Zip			
Having been named as registered agent and to accept sent the place designated in this certificate. I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obless. Registered Agent's Signal	t the appointment as registered agen of all statutes relating to the proper to igations of my position as registered en 605 F.S.	t and agree and comple	e to act ete perfo	in this ormance
		TAI	201	
(CONTINU	ED)	LAK	Ļ.AP	\neg
Page 1 of 2		SECRETARY OF STATE	2014 APR 23 AH 11: 29	FILED

<u>Title:</u>	Name and Address:
"AMBR" = Authorize	d Member
"MGR" = Manager	
MGR	Randall Lycke
	17215 Bonita Lane East
	Sugarloaf Key, FL 33042
	
	•
E V: Effective date, if ective date is listed, the	other than the date of filing: (OPTIONAL) e date must be specific and cannot be more than five business days prior to or
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(Use attachment if nec E V: Effective date, if ective date is listed, the of filing.) E VI: Other provisions REQUIRED SIGNA	other than the date of filing:
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Page 2 of 2

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)