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COVER LETTER *

| Division of Corporations | · | ¥. |
|---|---|--|
| SUBJECT: SHALOM PROPERTIES, LLC Name of Lin | nited Liability Company | |
| The enclosed Articles of Organization and fee(s) as | re submitted for filing. | |
| Please return all correspondence concerning this m | atter to the following: | |
| JOEL PAREDES | Name of Person | |
| MCKINLEY LAW FIRM, P.A. | Firm/Company | |
| 33 STATE ROAD 60 WEST | Address | · · · · · · · · · · · · · · · · · · · |
| LAKE WALES, FLORIDA 33853 | City/State and Zip Code | |
| joel@mckinleylaw.net E-mail address: (to be use | d for future annual report notifica | ation) |
| For further information concerning this matter, plea | ase call: | |
| RICHARD MCKINLEY at () Name of Person | 863) <u>533-6698</u> Area Code Daytime Te | lephone Number |
| Enclosed is a check for the following amount: | | |
| \$125.00 Filing Fee \$\times \text{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

McKinley Law Firm

Richard McKinley Sara M. McKinley

April 25, 2014

Bartow:

190 East Davidson Street Post Office Box 2228 Bartow, Florida 33831-2228 Telephone (863) 533-6698 Facsimile (863) 534-1790

Lake Wales:

33 State Road 60 West Lake Wales, Florida 33853 Telephone (863) 678-9776 Facsimile (863) 679-8467

Reply to: Bartow

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Reference No.:

W14000016439

Document No.:

L03000042727

Letter No.:

414A00005562

Dear Division of Corporations:

Enclosed please find your letter dated March 13, 2014 and a revised Articles of Organization. Should you have any questions, please contact my office.

Sincerely yours,

Richard McKinley

RM/la

Enclosure as noted

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2014

JOEL PAREDES MCKINLEY LAW FIRM, P.A. 33 STATE ROAD 60 WEST LAKE WALES, FL 33853

SUBJECT: SHALOM PROPERTIES, LLC

Ref. Number: W14000016439

We have received your document for SHALOM PROPERTIES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is: SHALOM PROPERTIES OF FLORIDA, LLC, document number L03000042727.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown Regulatory Specialist II

Letter Number: 414A00005562

ARTICLES OF ORGANIZATION FOR ELORIDA LIMITED LIABILITY COMPANY

| ARTICIZES OF ORGANIZATION FOR THE | WINDY THE PROPERTY OF THE PARTY |
|--|--|
| ARTICLE I - Name: The name of the Limited Liability Company is: | |
| MCKPAR, LLC | \$2.00 mg |
| | iability Company, "L.L.C.," or "LLC."). |
| ARTICLE II - Address: The mailing address and street address of the principal offi | To so |
| Principal Office Address: | Mailing Address: |
| 190 EAST DAVIDSON STREET BARTOW, FL 33830 | P.O. BOX 2228 BARTOW, FL 33831-2228 |
| (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration. The name and the Florida street address of the registered a |) |
| RICHARD MCKINLEY | |
| Name | |
| 33 STATE ROAD, 60 WEST Florida street address (P.O. Box I | NOT acceptable) |
| LAKE WALES, | FL 33853 |
| City | Zip |
| the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of | vice of process for the above stated limited liability company a the appointment as registered agent and agree to act in this f all statutes relating to the proper and complete performance gations of my position as registered agent as provided for in |

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

| <u>litle:</u> | Name and Address: |
|--|---|
| AMBR" = Authorized Me | |
| MGR" = Manager | |
| MBR | JOEL PAREDES |
| | 33 STATE ROAD, 60 WEST |
| | LAKE WALES, FL 33853 |
| MBR | RICHARD MCKINLEY |
| | 190 EAST DAVIDSON STREET |
| | BARTOW, FL 33830 |
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| V: Effective date, if other tive date is listed, the date filing.) | than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days prior to or 90 |
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