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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	CCT: Orlando SuperSource, LLC Name of Lir	nited Liability Company	_	
The en	closed Articles of Organization and fee(s) and	re submitted for filing.		
Please	return all correspondence concerning this m	atter to the following:		
	Sheldon E. Friedman, Esq.			
		Name of Person		
	Friedman, Dever & Merlin, LLC			
		Firm/Company	CL.	
	5555 Glenridge Connector NE, Sui	ite 925		
		Address	AX X	warehine Collection
	Altanta, GA 30342		7 P	
		City/State and Zip Code		(Specimen
sn	nahr@supersource.com	d for future annual report notification)	4: 46 -	A Nices
For fur	ther information concerning this matter, plea	•	***	
Scott	Mahr at (770 423-0006 Area Code Daytime Telephone Numb	 ner	
	Nume of Feldon	The Code Daytine Persphone Name		
Enclos	ed is a check for the following amount:			
⊻ \$125.0	0 Filing Fee \$\sum \sum \\$\sum \\$\sum \\$\sum \\$\text{130.00 Filing Fee & Certificate of Status}\$	(additional copy is enclosed) Certified	te of Status &	ì
	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

The name of the Limited Liability Company is:	
Orlando SuperSource, LLC (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3655 Kennesaw 75 Parkway Suite 100 Kennesaw, GA 30144	3655 Kennesaw 75 Parkway Suite 100 Kennesaw, GA 30144
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual of
The name and the Florida street address of the registered a	
Paracorp Incorporated	
Name	
236 E 6th Ave Florida street address (P.O. Box 1	NOT acceptable)
<u>Tallahassee</u> City	FL 32303 Zip

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 605, F.S..

Maron Carle Sharon Cooke, Asst. Secretary, Paracorp Incorporated Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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