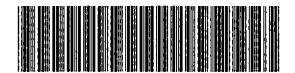
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

EFFECTIVE DATE DUDITY



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2014 JUN - 2 PH 3: 42

JUN 0.5 2014 D. BRUCE

COVER LETTER

TO: Registration Division of	n Section Corporations				
SUBJECT: Holnes	es Learning Center, LLC. Name of Lir	mited Liability Company			
	s of Organization and fee(s) a	_			
Please return all corre	espondence concerning this m	latter to the following:			
		Jeptha L. Holness Name of Person			
•	Holness Learning	1 Center, LLC, DBA Kumon of Firm/Company	Boca-Delray		
		Time Company			
<u> </u>		401 NW 6 Street	<u> </u>		
		Address			
		Plantation, FL 33317 City/State and Zip Code			
		ffholness@yahoo.com	-		
	E-mail address: (to be use	d for future annual report notifica	ation)	. 29	
For further information	on concerning this matter, plea	ase call:			Ť
	ha "Jeff" Holness at (_			JUN-2	Mui. Ciri
Nar	ne of Person	Area Code Daytime Te	lephone Number	- 4	rie i
Enclosed is a check for	or the following amount:			PH 3:	
□ \$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Copy (additional copy is enclosed)		
Ma	iling Address	Street/Courier Add	ress		

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

Holness Learning Center		
(Must end with the words	s "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
4401 NW 6 Street	4401 NW 6 Street	
Plantation, FL 33317	Plantation, FL 33317	
	as its own Registered Agent. You must designate an individual or registration.)	991 1
another business entity with an active Florida The name and the Florida street address of the	registered agent are:	
another business entity with an active Florida The name and the Florida street address of the	registration.) registered agent are:	2
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another business entity with an active Florida The name and the Florida street address of the	registration.) registered agent are: aptha L. Holness Name 401 NW 6 Street (P.O. Box NOT acceptable) FL 33317	-2 17
another business entity with an active Florida The name and the Florida street address of the	registration.) registered agent are: aptha L. Holness Name 401 NW 6 Street (P.O. Box NOT acceptable) FL 33317	-2 17

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(CONTINUED)

Page 1 of 2

EFFECTIVE DATE Ob/OJ/Y

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	leather I. Helmoor
AMBR	Jeptha L. Holness 4401 NW 6 Street
	Plantation, FL 33317
AMBR	Diana Marsh Holness
	4401 NW 6 Street
	Plantation, FL 33317
EV: Effective date, if other than the ective date is listed, the date must	e date of filing:
E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days r. LLC, shall be to own and operate a Kumon Math and Reading
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