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Certified Copies	Certificates	of Status
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SECRETARY OF STATE

N. Sulligan OCT 2 o 2014

## **COVER LETTER**

Division of Corpor			
SUBJECT: McLaren Ven	tures LLC Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of Org	anization and fee(s) are	e submitted for filing.	
Please return all corresponde	nce concerning this ma	atter to the following:	
Michelle McLar	en	Name of Person	
McLaren Ventu	res LLC		· .
		Firm/Company	
1500 Beville Ro	I, Suite 606-324	Address	
<u>Daytona Beach</u>		ty/State and Zip Code	
<u>michelle@mclarenver</u> E-m	tures.com nil address: (to be used	for future annual report notifica	tion)
For further information conce	rning this matter, pleas	se call:	
Michelle McLaren Name of Pe	at (_3		ephone Number
		Area Code Dayline Ter	ephone Number
Enclosed is a check for the fo	llowing amount:		•
	30.00 Filing Fee & ertificate 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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
	•	
McLaren Ventures LLC		
	nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the princip	oal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1500 Beville Rd	1500 Beville Rd	
Suite 606-324	Suite 606-324	
Daytona Beach, FL 32114	Daytona Beach, FL 32114	
The name and the Florida street address of the register Michelle McLaren N	lame	2114 OCT
1500 Beville Rd. Suite 600 Florida street address (P.O.		27 I
Florida street address (P.O.	Box NOT acceptable)	27 PM
		27 PM 2: 2

(CONTINUED)

Page i of 2

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Michelle McLaren	
	1500 Beville Rd, Suite 606-324	
	Daytona Beach FL 32114	
AMBR	Bryan McLaren 1500 Beville Rd, Suite 606-324	
	Daytona Beach FL 32114	
(Use attachment if necessary)		
EV: Effective date, if other than the date fective date is listed, the date must be spof filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 day	/S \$
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REQUIRED SIGNATURE:	McLarer	
REQUIRED SIGNATURE:  Signature of a me (In accordance with section 6)	ember or an authorized representative of a member.  25.0203 (1) (b), Florida Statutes, the execution of this document	
REQUIRED SIGNATURE:  Signature of a me (In accordance with section 60 constitutes an affirmation under	ember or an authorized representative of a member.  25.0203 (1) (b). Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.	
REQUIRED SIGNATURE:  Signature of a me (In accordance with section 60 constitutes an affirmation undo I am aware that any false infor	ember or an authorized representative of a member.  25.0203 (1) (b). Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. It is a comment of the state of the penalties of perjury that the facts stated herein are true.	 
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