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Florida Department of State
Division of Corporations
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EFFECTIVE DATE
2-10-2015

To:
Division of Corporations
Fax Number : (850)617-6383

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TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: LSCrealestate@yahoo.com

RECEIVED
15 FEB 11 AM 10:00
DIVISION OF CORPORATIONS
BUREAU OF CORPORATE
INFORMATION SERVICES

**FLORIDA LIMITED LIABILITY CO.
LSC Real Estate Investments LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
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K. SALY
EXAMINER
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H15000036095

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE
2-10-2015**LSC Real Estate Investments LLC**

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:Mailing Address:1025 SE 21st Street
Okeechobee, FL 349741025 SE 21st Street
Okeechobee, FL 34974

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Linda Basile

Name

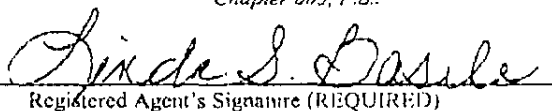
1025 SE 21st StreetFlorida street address (P.O. Box **NOT** acceptable)OkeechobeeFL 34974

City

Zip

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TALLAHASSEE, FLORIDA

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.



Registered Agent's Signature (REQUIRED)

Linda Basile

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Linda S. Basile

1025 SE 21st Street

Okeechobee, FL 34974

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CLERK OF DISTRICT COURT
STATE OF FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 02/10/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Linda S. Basile

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.)

Linda S. Basile

Typed or printed name of signee

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