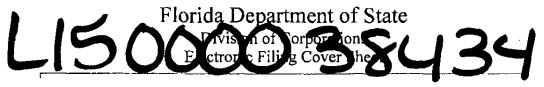
Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From

Email Address:_

Account Name : BOND, SCHOENECK & KING, PLLC

Account Number: I20010000122

Phone Fax Number : (239)659-3800 : (239)659-3812

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

FLORIDA LIMITED LIABILITY CO.

Patty Wood Enterprises, LLC

	<u> </u>
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION

OF

PATTY WOOD ENTERPRISES, LLC

ARTICLE I - NAME

The name of the limited liability company is PATTY WOOD ENTERPRISES, LLC ("Company").

ARTICLE JI - ADDRESS

The mailing address and street address of the principal office of the Companyist		_	
Principal Office Address: 4041 GULF SHORE BLVD N #108 NAPLES, FL 34103	Mailing Address: Mailing Address: 4041 GULF SHORE BLVD N #10:508 NAPLES, FL 34103	A.	
ARTICLE III -	REGISTERED AGENT.	AM 10:	
<u>REGISTERED OFFICE, & F</u>	REGISTERED AGENT'S SIGNATURES	9	

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

PATRICIA ANN WOOD 4041 GULF SHORE BLVD N #108 NAPLES, FL 34103

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.

PATRICIA ANN WOOD, Registered Agent

366062.1

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ARTICLE IV - MANAGERS

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

Title:

Name and Address:

Authorized Member (AMBR)

PATRICIA ANN WOOD 4041 GULF SHORE BLVD N #108

NAPLES, FL 34103

REQUIRED SIGNATURE:

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

(In accordance with section 605.205(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

PATRICIA ANN WOOD, Member

Typed or printed name of signor

2015 MAR -2 AM 10: 16 SECRETARY OF STATE

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