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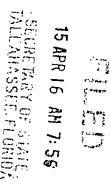
(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Laurens APR 2 A 2015

COVER LETTER

TO:		tion Section of Corporatio	ns			
SUBJE	CT:	Steria	Holdings Name of Lin	LLC		
			Name of Lin	nited Liability C	Company	
The enc	losed Arti	cles of Organiz	ation and fee(s) ar	e submitted for	filing.	
Please r	eturn all c	orrespondence	concerning this m	atter to the follo	owing:	
		+	Eric Zove	gar		
				Name of Pers	son	
			Steria f	Holdings,	LLC	
				Firm/Compa	ny	
		7.	625 NW (ol Terrac	e #2702	
		Park	Jand FL Jan @ gna ddress: (to be used	33062)	
		FZcc	C C	ity/State and Zi	p Code	
		E-mail a	ddress: (to be used	for future annu	ual report notifica	tion)
For furt	her inform	ation concerning	g this matter, plea	ise call:		
E	. 110	Zeryer Name of Person	at (CI 54 Area Code	242- 118 Daytime Tel	ephone Number
Enclose	d is a chec	k for the follow	ving amount:			
\$125.00) Filing Fe		00 Filing Fee & icate of Status	Certified C	_	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
		Mailing Addre			eet/Courier Addr	r <u>ess</u>
		Registration Sec Division of Cor		Div	istration Section ision of Corporat	ions
		P.O. Box 6327 Tallahassee, Fl.	. 32314		ton Building 1 Executive Cent	er Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Steria Holdings, (Must end with the words "Limited I	LLC Liability Company, "L.L.C.," or "LL.C.")
	Ending company, Elective or Elective
ARTICLE II - Address: The mailing address and street address of the principal off	ffice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7525 NW 61 terrace # 2702 -	7525 Nu 61 terrare #2702 Parkland FL 33067
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered a	-
Eric Zargar Name	
7525 NW 61 7 Florida street address (P.O. Box 1	Terrace # 2702
Parkiand	FL 33067
,	
the place designated in this certificate, I hereby accept a capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	vice of process for the above stated limited liability company to the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performand ligations of my position as registered agent as provided for in er 605, F.S.
	≥ 00
Registered Agent's Signatu	TREGUIRED 5
Registered Agent's organic	THE (REQUIRED)
(CONTINUE	ED)
Page 1 of 2	AM 7:56

Title:	Name and Address:	
"AMBR" = Authorized Member	- Wille Hind Feddress	
"MGR" = Manager		
AMBR	Fric Zargar	
		
· · · · · · · · · · · · · · · · · · ·		
EV: Effective date, if other than the datective date is listed, the date must be sp	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90	0 da
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