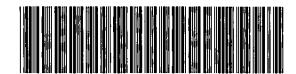


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R. WHITE

COVER LETTER

	ivision of Corporations
SUBJECT	Security And Firearms Education International LLC
SODJECT	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	William A. Jarvis
	Name of Person
	Security And Firearms Education International LLC
	Firm/Company
	1313 N. Tampa St. #702
	Address
	Tampa, FL. 33602
•	City/State and Zip Code Safetrainingllc@gmail.com
-	E-mail address: (to be used for future annual report notification)
For further in	nformation concerning this matter, please call:
	William Jarvis 727 510-6677
	Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
\$125.00 Fi	ling Fee \$\int_{\text{S130.00 Filing Fee & Certificate of Status}} \int_{\text{Certified Copy (additional copy is enclosed)}} \int_{\text{S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}} \int_{\text{Certified Copy (additional copy is enclosed)}} \int_{Certified Copy (additional copy is
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I.- Name: The name of the Limited Liability Company is: 16 SEP 29 PM 3: 41 Security And Firearms Education International LLC (Must end with the words "Limited Liability Company, "L.L.C.," or **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 1313 N. Tampa St. #702 1313 N. Tampa St. #702 Tampa, FL. 33602 Tampa, FL. 33602 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: William A. Jarvis Name

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..

Florida street address (P.O. Box NOT acceptable)

State

1313 N. Tampa St. #702

Tampa, FL. 33602

City

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Zip

Page 1 of 2

<u> Citle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	William A. Tamila
AMBR	William A. Jarvis
	1313 N. Tampa St. #702
	Tampa, FL 33602
	
V: Effective date, if other than the dative date is listed, the date must be stilling.)	te of filing: Upon Filing
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ARTICLE IV-