

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L17000233985
FILED 8:00 AM
November 13, 2017
Sec. Of State
kbrumbley

Article I

The name of the Limited Liability Company is:

SUSAN ANTOINETTE ART, LLC

Article II

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

515 22ND ST S
ARTSXCHANGE STUDIO 207
ST PETERSBURG, FL. 33712

The mailing address of the Limited Liability Company is:

1110 3RD ST S
ST PETERSBURG, FL. 33701

Article III

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

REGISTERED AGENTS INC.
3030 N. ROCKY POINT DR
SUITE 150A
TAMPA, FL. 33607

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.

Registered Agent Signature: BILL HAVRE

Article IV

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The name and address of person(s) authorized to manage LLC:

Title: MGR
SUSAN J ANTOINETTE
1110 3RD ST S
ST PETERSBURG, FL. 33701

Title: AMBR
SUSAN J ANTOINETTE
1110 3RD ST S
ST PETERSBURG, FL. 33701

Title: AMBR
PAUL R ANTOINETTE
1110 3RD ST S
ST PETERSBURG, FL. 33701

Title: AMBR
JAN ROLAND
4637 LATHROP
RACINE, WI. 53402

Signature of member or an authorized representative

Electronic Signature: SUSAN JR ANTOINETTE

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.