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DAVID P. JOHNSON

Attorney and Counselor at Law 2201 Ringling Boulevard, Suite 104 Sarasota, Florida 34237

CERTIFIED PUBLIC ACCOUNTANT
CERTIFIED FINANCIAL PLANNER **
CHARTERED LIFE UNDERWRITER
CHARTERED FINANCIAL CONSULTANT

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April 6, 2021

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Florida 32303

Via FedEx Tracking Number 8057 8489 8463

RE: VIOLET SRQ, LLC

The enclosed Articles of Organization and filing fee of \$125 are submitted for filing.

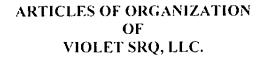
Please return all correspondence and forward the Annual Report E-mail notification to the following:

Shirley A. Page 10217 Fruitville Rd. Sarasota, Florida 34240 Email: sapage12@aol.com

For further information concerning this matter, do not hesitate to contact me.

Very truly yours,

DAVID P. JOHNSON



ARTICLE I - NAME

The name of the Limited Liability Company is VIOLET SRQ, LLC, and its effective date is April 6, 2021.

ARTICLE II - ADDRESS

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

Principal Office Address: 10217 Fruitville Rd. Sarasota, Florida 34240 Mailing Address: 10217 Fruitville Rd. Sarasota, Florida 34240 100 mg 10

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Shirley A. Page 10217 Fruitville Rd. Sarasota, Florida 34240

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.

SHIRLEY A. PAGE

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

MGR

Shirley A. Page 10217 Fruitville Rd. Sarasota, Florida 34240

REQUIRED SIGNATURE:

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

This document is executed in accordance with section 605.0203(1)(b). Florida Statutes. 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 \$.817.155, F.S.

SHIRLEY A. PAGE

Typed or printed name of signee