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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Kantry Works LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thomas Enacls 50 Name of Person
Kuntry Works Firm/Company 2820 Hunterdow Court Address
2820 Hunterdon Court
Tallahasse Fl 32310 City/State and Zip Code Thomas 1/25 75 @ Gmail. com
Thomas 1125 786 Gmail. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

<u>Street Address</u> New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Kuntry Works LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE I - Name:

The name of the Limited Liability Company is:

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MLLANASSEE, FL

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
2820 Knotes Lon Court	2820 Hunter dow Court
Tellahasses El	Tullahessee El
32310	32310

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:

Prand: Ennels

Name

2820 Hunterdon Court

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

Tallabassee FT 32310

City State Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	, , ,
MGR	Thomas Enacls Jr.
	Sec. 1
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LE V: Effective date, if other than	the date of filing: (OPTIONAL)
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S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)

ARTICLE IV-