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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
14087 Gastin Circle	14087 Gaskin Circle
Sonderson HI Soce	Sunderson 41 32087

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:

Teresci	Mecco	(in)
. 1	Name	
14087	Gastin	Circle
Florida street a	ddress (P.O. Box <u>NO</u>	$oldsymbol{T}$ acceptable)
Sancle	1500 Fl	32087
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 (REOUTRED)

(CONTINUED)

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

Title:		Name and Address:	
"AMBR" = Authori	zed Member		
"MGR" = Manager		Tames Modern	
"MOR"		Teresa McCray 14267 Gaskin Circle 29nderson, Pl 32087	
	-	Sanderich 11 32087	
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ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:	Mailing Address:
14087 Crostin Circle	14087 Craskin Circle Sanderson, 1/ 37087

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:

Name

Name

Name

Note Circle

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

Scincle (Scince 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. Thereby 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 (REQUIR)ED

(CONTINUED)

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Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
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	Triesa McCray 14087 Gerken Circle Sanderson, 11 32087	
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