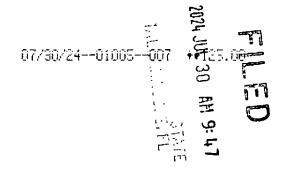
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: MCKenzie A.C. SLAND V
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ryan McKenzie
Name of Person
Firm/Company 99
Firm/Company
9404 N Mulberry St.
Tampa FL 33612
City/State and Zip Code MC/GNZila/Supply// Camal.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ryan McKenzie at (813) A 309-2340 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
E13125.00 Filing Fee
Mailing Address New Filing Section

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

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

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.O.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 9404 N Mulberry St tampa, FL 33612 + Ampa, FL 33612
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: APO4N Mulberry St Ryan McEnZill Name Tampa Fl 33 42 Florida street address (P.O. Box NOT acceptable) City State Zip
Flaving 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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR.	Ryan McKenzie Tampa F6 133612	
		
		•
(Use attachment if necessary)		. 20
If an effective date is listed, the date must be spec he date of filing.)	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not of State's records.	ယ ကူ
ARTICLE VI: Other provisions, if any.		1 9: 4
		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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