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TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SECRET
JAN 19 1996
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-01/18/96-01000-001
****346.25

SUBJECT: Shift Limited Company
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy of the articles of organization and a check for :

<input type="checkbox"/> \$285.00	<input type="checkbox"/> \$293.75	<input type="checkbox"/> \$337.50	<input checked="" type="checkbox"/> \$346.25
Filing Fee & Registered Agent designation Certificate	Filing Fee, Registered Agent Designation & Certified Copy	Filing Fee, Registered Agent Designation & Certified Copy &	Filing Fee, Registered Agent Designation, Certificate

FROM: James K. Drudge
Name (Printed or typed)
7861 N.W. 3 ST. #29-104 Pembroke Pines, Fl 33024
Address
Pembroke Pines, Fl. 33024
City, State & Zip
(954) 985-9778
Daytime Telephone number

MGRM

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1/23/96
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NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Shift Limited Company

ARTICLE II - Address:

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

7861 N.W. 3 ST. Pembroke Pines, Fl. 33024
Bldg 29 Apt. 104

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

James K. Drudge:

7861 NW 3 St. #29-104 Pembroke Pines, Fl. 33024

Lance J. Stinson:

463 Boxwood Ct. Kissimmee, Fl 34741

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

The right is given to admit additional members to the company under no terms other than a majority vote of current managing members.

ARTICLE VI - Members Rights to Continue Business:

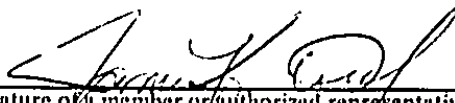
The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The right to continue the company is given should any of the aforementioned conditions befall any of the members following a majority vote by remaining members to continue the company.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
Shift Limited Company deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 5000.00 .
- 3) if any, the agreed value of property other than cash contributed by member(s) is
\$ N/A . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is
\$ 20,000.00 . This total includes amounts from 2 and 3 above.



Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statute, the execution of this affidavit
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Shift Limited Company

2. The name and address of the registered agent and office is:

Lance J. Stinson
(Name)
463 Boxwood Ct.
(P.O. Box or Mail Drop Box **NOT** acceptable)
Kissimmee, Fl. 34741
(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.


(Signature)

1/10/95
(Date)

Filing Fee: \$ 35 for Designation of Registered Agent