Filing ID: 170530-1516049

Filing Date: 05/30/2017

STATE OF SOUTH CAROLINA SECRETARY OF STATE

ARTICLES OF ORGANIZATION Limited Liability Company – Domestic

The undersigned delivers the following articles of organization to form a South Carolina limited liability company pursuant to S.C. Code of Laws Section 33-44-202 and Section 33-44-203.

1.	The name of the limited liability company (Company ending must be included in name*)				
	77 Steps, LLC				
	*Note: The name of the limited liability company must contain one of the following endings: "limited liability company" or "limited company" or the abbreviation "L.L.C.", "LLC", "L.C.", "LC", or "Ltd. Co."				
2.	The address of the initial designated office of the limited liability company in South Carolina is 1169 Neptune Road				
	(Street Address)				
	Myrtle Beach, South Carolina 29575				
	(City, State, Zip Code)				
3.	The initial agent for service of process is				
	Millard Heaphy				
	(Name)				
	(Signature of Agent)				
	And the street address in South Carolina for this initial agent for service of process is: 3060 Shorecrest Bay Drive				
	(Street Address)				
	Murrells Inlet South Carolina 29576				
	(City) (Zip Code)				
1.	List the name and address of each organizer. Only one organizer is required, but you may have more than one.				
a)	Russell J. Oyer				
	(Name) 9 Cartwright Road				
	(Street Address)				
	Stony Point, New York 10980				
	(City, State, Zip Code)				

	77 Steps, LLC
	Name of Limited Liability Company
(b)	Barbara J. Oyer
	(Name) 9 Cartwright Road
	(Street Address)
	Stony Point, New York 10980
	(City, State, Zip Code)
5.	Check this box only if the company is to be a term company. If the company is a term company, provide the term specified.
6. (a)	Check this box only if management of the limited liability company is vested in a manager or managers. If this company is to be managed by managers, include the name and address of each initial manager.
()	
	(Name)
	(Street Address)
(b	(City, State, Zip Code)
	(Name)
	(Street Address)
	(City, State, Zip Code)
7.	Check this box <u>only if</u> one or more of the members of the company are to be liable for its debts and obligations under Section 33-44-303(c). If one or more members are so liable, specify which members, and for which debts, obligations or liabilities such members are liable in their capacity as members. This provision is optional and does <u>not</u> have to be completed.
0	Unless a deleved effective data is appoiling those esticion will be effective when and are differ by the Country
٥.	Unless a delayed effective date is specified, these articles will be effective when endorsed for filing by the Secretary State. Specify any delayed effective date and time
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77 Steps, LLC		

Name of Limited Liability Company

9. Any other provisions not consistent with law which the organizers determine to include, including any provisions that are required or are permitted to be set forth in the limited liability company operating agreement may be included on a separate attachment. Please make reference to this section if you include a separate attachment.

10. Each organizer listed under number 4 must sign.		
Signed as Filer: Angela D. Harrison		
Signature of Organizer		
Date: 05/30/2017		
Signed as Filer: Angela D. Harrison		
Signature of Organizer		
Date: 05/30/2017		

Business Name:	77	Steps,	LLC	

Signature Page for a Secretary of State Business Filing

This page must be completed, scanned, and attached to any business filing where one of the following is true.

- The filing party signs the digital form on behalf of official signee.
- An attorney's signature is required. (Articles of Incorporation for Corporation and Benefit Corporation)

Official :	Signatur	es
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(Officer, Incorporator, Director, Agent, Partner, etc)

Required for forms where the signee is not present upon online submission and a filing party is providing a digital signing on their behalf. If the provided space is not enough, please attach multiple pages.

Russell J. Oyer	5/26/2017
Name ////	Date
(Tussel / Cym	Member
Signature	Title / Position
Barbara J. Oyer	5/26/2017
Name	Date
Barbara J Ger	Member
Signature	Title / Position
Name	Date
Signature	Title / Position
:	
Name	Date
Signature	Title / Position
Name	 Date
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Signature	Title / Position