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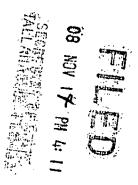
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Special Instructions to Filing Offi	cor:
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S. HAWKES

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	ECT. Hurricane Ren	tals & Prop	erties LLC	;	
		(Name of Limited	Liability Comp	any)	
The en	closed Articles of Organization	n and fee(s) are sul	omitted for filin	g.	
Please	return all correspondence cond	cerning this matter	to the following	g :	
	Wendy Moore				
		(N	ame of Person)		
		(F	rm/Company)		
	21 Pearl St.	,,,	Company)		
		', '' , '' , 	(Address)		
	Clinton, CT. 06413	3			
		(City/S	tate and Zip Code	e)	
For fu	ther information concerning th	is matter, please co	ıll:		
Wendy Moore			_{t (} 860	, 664-361	0
	(Name of Person)		(Area Cod	le & Daytime Tel	ephone Number)
Enclos	sed is a check for the follow	ing amount:			
] \$125	00 Filing Fee \$130.00 Certificat	Filing Fee & [te of Status	\$155.00 Filin Certified Co (additional cop	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	P.O. Box 6	n Section f Corporations	Registrat Division Clifton E 2661 Exc	ourier Address ion Section of Corporations duilding ecutive Center (see, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	_
The name of the Limited Liability Company is:	
Hurricane Rentals & Properties LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Comp
Principal Office Address:	Mailing Address:
Wendy Moore	Wendy Moore
3745 Woods Creek Rd	21 Pearl ST.
Perry, FL. 32347	Clinton, CT. 06413
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Wendy Moore	
Name	- Market
3745 Woods Creek F	RD.
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Dorn/ El 22247	

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 608, F.S..

egistered Agent's Signature (REQUIRED)

City, State, and Zip

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = M		Name and Address:	
"MGRM" =	Managing Member		
MGR		Ricky Moore	
_		21 Pearl ST.	_
		Clinton, CT. 06413	-
MGR		Wendy Moore	4. (3)
		21 Pearl ST.	-3
		Clinton, CT. 06413	
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			•
(Use attachn	nent if necessary)		•
CLE V: Effective date I days after the	tive date, if other than	the date of filing: (OPTIC of the specific and cannot be more than five business	
CLE V: Effective date I days after the	tive date, if other than is listed, the date mus		
CLE V: Effective date I days after the	tive date, if other than is listed, the date mus he date of filing.) SIGNATURE:		
CLE V: Effective date I days after the	tive date, if other than is listed, the date must be date of filing.) SIGNATURE: Signature of a men of this document co	et be specific and cannot be more than five business	
CLE V: Effective date I days after the	tive date, if other than is listed, the date must be date of filing.) SIGNATURE: Signature of a men of this document co	mber or an authorized representative of a member. a section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ed herein are true.)	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)