Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940

Fax Number : (516) 935-3088

LIMITED LIABILITY COMPANY

Walker Chedik Acquisitions LLC

Certificate of Status	1		
Certified Copy	0		
Page Count	01		
Estimated Charge	\$130.00		

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SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Walker Chedik Acquisitions LLC

ARTICLE II - Address

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

634 NE 71 ST Miami, FL 33138

ARTICLE III - Registered Agent, Registered Office & Registered Agent's signature
The name and Florida street address of the registered agent are:

Aaron Walker	
Name	_
634 NE 71 ST	
(P.O. Box or Mail Drop Box NOT Acceptable)	_
Miami, FL 33138	
(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 608, F.S.

Registered Agent's Signature - Aaron Walker

AR	TICLE IV - Management (Check box if applicable)
	The Limited Liability Company is to be managed by one manager or more managers and is,
	therefore, a manager - managed company
	Signature of a member or authorized representative of a member.
	

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

	A	aron	<u>Wa</u>	lker
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