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| equester's Name | | |
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| Address | | |
| ABIHARteting, Inc. 601 Cleveland St. Clearwater, FL 337 | Ste 950 55 | 8000050237082 -02/27/0201047010 ****125.00 ****125.00 |
| CORPORATION NAME(S) & DOC | CUMENT NUMBER(S), (ii | Office Use Only known): |
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| (Corporation Name) | (Document #) | · · · · · · · · · · · · · · · · · · · |
| ☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait | Photocopy | ☐ Certified Copy ☐ Certificate of Status |
| NEW FILINGS Profit Not for Profit Limited Liability Domestication Other | AMENDMENTS Amendment Resignation of R Change of Regis Dissolution/With Merger REGISTRATION/(| ndrawal 70 3 15 |
| OTHER FILINGS □ Annual Report □ Fictitious Name | Foreign Limited Partners Reinstatement Trademark Other | |
| | | Examiner's Initials |

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: |
|---|
| ABOW, LLC |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: COLONGER FL 33755 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: |
| Lisa Shively |
| 601 Cleveland St. Ste 950 Florida street address (P.O. Box NOT acceptable) |
| Clearwoter FL 33755 City, State, and 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. |
| Article 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. (An additional article must be added if an effective date is requested) |
| Signature of a member or an 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.) |
| Jaroes Herror Jr. Typed or printed name of signee |
| Filing Fees: \$108.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 36.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) |
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