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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: FAS-T CORP. AGENTS, INC. Account Name

Account Number : 071001002335 : (305)599-0839 Phone : (305)716-0346 Fax Number

LIMITED LIABILITY COMPANY

JAMES H. HINTON, SR., LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 01 |
| Estimated Charge | \$155.00 |

DIVISION OF CORPORATION

AM 7: 59

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Pursuant to a.608.407, Florida Statutes)

ARTICLE I - NAME

The name of the Limited Liability Company is:

James H. Hinton, Sr., LLC

ARTICLE II - ADDRESS

The mailing and succt address of the principal office is:

1409 Kimberly Lane Tarpon Springs, FL 34689

ARTICLE III - REGISTERED AGENT

The name and address of the registered agent are:

James H. Hinton, Sr. 1409 Kimberly Lane Tarpon Springs, FL 34689

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

The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

> James H. Hinton, Sr. 1409 Kimberly Lane

Turpon Springs, FL 34689

In accordance with section 508.408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated within are true.

Signature of Member/Manager

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