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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Howard Kushlan 9195 Collins Avenue Apt. 1010 Surfside, Florida 33154 (305) 861-5037

To Whom It May Concern:

My name is Howard Kushlan, and this is a cover letter for our new LLC, called AK&H Group, LLC.

My address is:

Howard Kushlan 9195 Collins Avenue, Apt. 1010 Surfside, Florida 33154

Daytime Phone: 305.861.5037

Thank you for your consideration.

Sincerely,

Howard Kushlan

03 NOV 26 PH 4: 41

## TRANSMITTAL LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: AK&H Group, LLC	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Howard Kuhlan (Name of Person)	, .
(Name of Person)	
AK#H Group, LLC (Firm/Company)	
9/95 6/1/1 Arne A+ 1010 (Address)	SEINIU SEINIU SEINIU
	<b>8 2 3 3</b>
Surfide, FL 33154 (City/State and Zip Code)	NOV 26
(City/State and Zip Code)	
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For further information concerning this matter, please call:	FO STATE
Jay House at 305 502-9093	SNO
(Name of Person) (Area Code & Daytime Telephone Number)	_

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
AK&H Group, LLC	The state of the s
ARTICLE II - Address:	
The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Howard Kyllan	·
919T Colley Army 4 1010	SA'ME
Sirtible FC 33154	
/	33 TAKE 1250
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered	& Registered Agent's Signature:
The name and the Florida street address of the registered	Tagont arc.
Howard Kyhlan	F STAI
Florida street address (P.O. Box Ne	pt #/0/0
Serfide, F/ FIG. City, State, and Zip	ORIDA 33/54/

Ilaving 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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
In. I D	12.1 41/.		
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	Brooklys, NY 1/215		*
M6RM	11 10 / 11		
	9/95 College Avery Art #101	<del></del>	
	Surfide, FL 33154		
MGR	Teremy Houser		
	2016 Bay Drive Apt # 70		
	Miani Buch, FL 33014		
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(Use attachment if necessary)		OG MOV 26	三光
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NOTE: An additional article must b	e added if an effective date is requested.	PM 4:41	-53 -53 -53 -53
REQUIRED SIGNATURE:		<u>-</u>	AIE
a/ 1a/			SH
Howard la-			
Signature of a member or an	authorized representative of a member.	•	
	8.408(3), Florida Statutes, the execution		
of this document constitutes an	affirmation under the penaltics of perjury		
that the facts stated herein are t	rue.)		
Howard Kus	shlan		
Typed or p	rinted name of signee		

Filing Fees: \$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)