

JAN-08-2004 11:20 AM

P.01

FROM : Clarion Ventures, Inc.

FAX NO. (801) 475-6420

JAN 07 2004 02:39PM P2

**HO4000001861**

**Florida Department of State  
Division of Corporations  
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**Electronic Filing Cover Sheet**

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**((HO4000004038 3))**

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To:

Division of Corporations  
Fax Number : (850) 205-0303

From:

Account Name : CLARION VENTURES, INC.  
Account Number : I20030000026  
Phone : (801) 721-4788  
Fax Number : (801) 475-6420

**LIMITED LIABILITY COMPANY**

**van ' t Hoff Creations LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

APPROVAL  
AND  
FILED

04 JAN -8 PM12:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DIVISION OF CORPORATION

RECEIVED  
04 JAN -8 AM11:52

*Handwritten signature*

H0400000 4038 3

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:  
van ' t Hoff Creations LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:  
433 Genesee Ave  
Indialantic, Florida 32903

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Hans Van t Hoff  
 \_\_\_\_\_  
 Name

433 Genesee Ave  
 \_\_\_\_\_  
 Florida street address (P.O. Box NOT acceptable)

Indialantic, FL 32903  
 \_\_\_\_\_  
 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.*

x Hans Van t Hoff  
 \_\_\_\_\_  
 Registered Agent's Signature

(An additional article must be added if an effective date is requested)

Hans Van t Hoff  
 \_\_\_\_\_  
 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.)

Hans Van t Hoff  
 \_\_\_\_\_  
 Typed or printed 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)

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 04 JAN -8 PM 12:09  
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