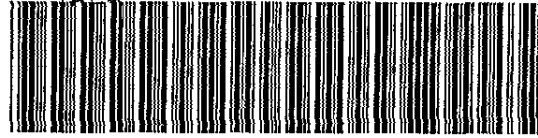


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04 FEB -4 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



000027987420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

04 FEB -4 PM 12:41

SUBJECT: SimmSing Properties L.L.C.
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tracy T. Singleton
(Name of Person)

1st Choice Management and Consulting
(Firm/Company)

7390 NW 52nd Street
(Address)

Lauderhill, FL 33319
(City/State and Zip Code)

For further information concerning this matter, please call:

Tracy Singleton at (954) 600-7644
(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**

FILED

04 FEB -4 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

SimmSing Properties L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

7390 NW 52nd Street

7390 NW 52nd Street

Lauderhill, Florida 33319

Lauderhill, Florida 33319

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

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

Tammy Mckinzie

Name

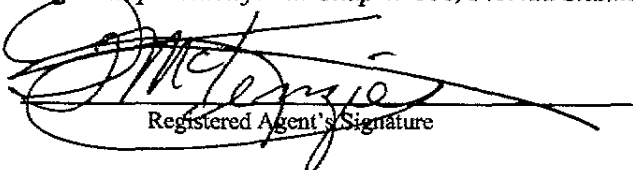
1813 NW 15th Street

Florida street address (P.O. Box **NOT** acceptable)

Fort Lauderdale, FLORIDA 33311

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, Florida Statutes..


Registered Agent's Signature

FILED

04 FEB -4 PM 12:41

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows: **SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Duane Simmons

7400 NW 52nd Street

Lauderhill, FL 33319

MGR

Tracy Singleton


7390 NW 52nd Street

Lauderhill, FL 33319

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

Tracy T. Singleton

Typed or printed name of signer

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)