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DIVISION OF CORPORATION

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Axum,	LLC nited Liability Company)	
(Name of Lim	nited Liability Company)	
The enclosed Articles of Organization and fee(s) are s	submitted for filing.	
Please return all correspondence concerning this matter	ter to the following:	
Dunyac A. Lugard	SEC TALL	21.
(Name of Person)	AHT	Ä
Axum, LLC	SSET CH	11 APR -1 PH 12: 03
PXUM, LLC (Firm/Company)	E.F. FLORI	13:2
741 N.W. 62nd Street.	ア	ـهـيم
(Address)		
minni, Flourin 33150 (City/State and Zip Code)		
(City/State and Zip Code)	·	
For further information concerning this matter, please	e call:	
Duryne A. wynn (Name of Person)	at (305) 751-399	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS:	MAILING ADDRESS:	

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

Axum, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

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

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

Name
Name

741 N.W. 6711 Street Scale 400

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

Mirani FL 77150

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..

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
menn	Duryne P. wynn 749 N. W. 624 Stauf minn, Florin 33150
	minner, Honora 33150
	and the second of the second o
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region of the control	ASSS
	PH 12: D3
(Use attachment if necessary)	DRID A

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.)

Typed or printed name of signee

\$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)