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C.W.H., L.L.C. ure Fairway Road Rotunda West, FL 33947
(City/State/Zip/Phone #)
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VIJUA OF TURPORATIONS TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Division of C	orporations		
SUBJECT: C.W.H., L.L.C.			
	(Name of Limite	d Liability Company)	
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
	Charles W.	Hart	•
	Ō	Name of Person)	
	C.W.H., L.	L.C.	Pro 1
		Firm/Company)	Star
	One Fairwa	y Road	DILLAH SEE FLORIDA
		(Address)	(a)
	Rotunda We	st, FL 33947	
	(City.	State and Zip Code)	
For further information	concerning this matter, please	call:	
Charles	W. Hart	at (207) 942-0073	
		(Area Code & Daytime T	elephone Number)
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	EET ADDRESS:	MAILING A	
Registration Section Division of Corporations 409 E. Gaines Street		Registration S Division of C P.O. Box 632	orporations

Tallahassee, Florida 32314

Tallahassee, Florida 32399

RTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY			
ARTICLE I - Name: The name of the Limited Liability Co	mpany is:		
C.W.H., L.L.C.			
ARTICLE II - Address: The mailing address and street addres	ss of the principal office of the Limited Liability Company is		
Principal Office Address:	Mailing Address:		
One Fairway Road	One Fairway Road		
Rotunda West, FL 33947	Rotunda West, FL 33947		
Char:	les W. Hart		
One 1	Name Fairway Road		
Flori	da street address (P.O. Box NOT acceptable)		
Rotunda (West _{FL} 33947		
	City, State, and Zip		
liability company at the place designed registered agent and agree to act in the statutes relating to the proper and company to the place designed to the place design	ent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of a complete performance of my duties, and I am familiar with and ion as registered agent as provided for in Chapter 608, F.S		
Regist	ered Agent's Signature		

(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:
MGR Charles W. Hart	Charles W. Hart One Fairway Road Rotunda West, FL 33947
(Use attachment if necessary) NOTE: An additional article must h	oe added if an effective date is requested.
REQUIRED SIGNATURE:	Mast
Signature of a thember	or an authorized representative of a member.
(In accordance with sect of this document constit that the facts stated he	tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)
Char	rles W. Hart
Тур	ed or printed name of signee
Filing Fees:	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)