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SECTION OF STATE

W4-91736

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: 3 Indiana Ltd. Co. (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:
Tricia Hollis (Name of Person)
(Firm/Company)
3351 Greenwich VIII Blud, #201
Oklando, FL 32835 (City/State and Zip Code)
For further information concerning this matter, please call:
Tricia Hollis at 407 230 1197 Etc. (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status
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:
3 Indiana Ltd. Co
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
3351 Greenwich VIII Blud 201 3351 Greenwich VIII Blud 201 Oblando, FL 32835 Orlando, FL 32835
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Trica Hollis
3351 Green Wich VI V Blud #201 Fig. 19 Florida street address (P.O. Box NOT acceptable)
Orlands FL 32835 SS 3 7 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)

Registered Agent's Signature

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MBRM	Tricia Hollis 3351 Greenwich VIII Blud #201 Orlando FL 32835
<u></u>	
(Use attachment if necessary) NOTE: An additional article must be a	added if an effective data is requested
REQUIRED SIGNATURE:	TALLAHASSI
(In accordance with section of this document constitutes that the facts stated herein	an authorized representative of a member.

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)