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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Hudson E (Name of Limite	ASSOCIATES Ed Liability Company)	LLC
The enclosed Articles of Organization and fee(s) are s	submitted for filing.	ZINGS APT
Please return all correspondence concerning this matter	er to the following:	A 2 .
Tavian	Hudson Name of Person)	CORPC (SSEE, F
		RATIONS
((Firm/Company)	
17108 Carrine	STON PK DR. (Address)	APT 702
Tampa Pl	33647 (State and Zip Code)	
For further information concerning this matter, please	call:	
Tavian Hoden (Name of Person)	at (<u>\$13</u>) <u>558</u> (Area Code & Daytime Te	- 8498 elephone Number)
Enclosed is a check for 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)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations [—] 7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
The name of the Emirica English Company is.
Hudson & Associates 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:
17108 Carrington PK TR 4046 Bruce B. Downs Blud, #101 LOT. 702 Tampa FL 33647
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Tavino Hudson
Name
17108 Carrington PK DR Florida street address (P.O. Box NOT acceptable)
Tampa FL 33647 City State and Zin

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.

Registered 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:

'itle: MGR" = Manager	Name and Address:	~
MGRM" = Managing Member	PLOT NA.	2
	The state of the s	2 0
		1.
		き
se attachment if necessary)		
OTE: An additional article must	be added if an effective date is requested.	
EQUIRED SIGNATURE:		
husan	Sledson	
Signature of a membe	r or an authorized representative of a member.	
(In accordance with se of this document const that the facts stated h	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury herein are true.)	
Tava	n Hudson	

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)