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To:

Division of Corporations

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From:

Account Name

: ACCOUNTING & BEYOND

Account Number : I19990000223

Phone

: (813)998-9800

Fax Number

: (813)935-9982

LIMITED LIABILITY COMPANY

WILLIAM HINES, LLC

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Corporate Filing

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CONTAINT

ARTICLE I . Name:

The name of the Limited Liability Company is:

WILLIAM HINES, LLC

ARTICLE II- Address:

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

6511 MARGARET DRIVE, PORT RICHEY, FL 34668

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

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

WILLIAM HINES

Name

6511 MARGARET DRIVE

Fiorida Street Address

PORT RICHEY, FL 34668

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.

Signature/Registered Agent

Date

Article IV .Management (Check box if applicable.)

K The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager managed company.

(An additional article must be added if an effective date is requested)

Signature of a member of 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.)

WILLIAM HINES

Typed or printed name of signee