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Broad and Cassel

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Division of Corporations

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Account Number : 076376001555
Phone : (561)483-7000
Fax Number : (561)218-8960

EFFECTIVE DATE

05/26/05

05 MAY 26 2005

DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

HFN TRANSPORTATION, LLC

Certificate of Status	0
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J. BRYAN MAY 27 2005



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Fax Audit Number: H05000132937 3**ARTICLES OF ORGANIZATION****OF****HFN TRANSPORTATION, LLC**

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company shall be: HFN TRANSPORTATION, LLC.

EFFECTIVE DATE05/26/05**ARTICLE II**

The mailing address and street address of the principal office of the limited liability company shall be 399 West Palmetto Park Road, Suite 200, Boca Raton, Florida 33432, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is 7777 Glades Road, Suite 300, Boca Raton, Florida 33434. The initial registered agent at that address is David J. Powers, P.A.

ARTICLE IV

This limited liability company shall commence its existence as of the execution hereof on May 26, 2005, and shall exist perpetually thereafter unless sooner dissolved.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 26th day of May, 2005.

DAVID J. POWERS, P.A., a Florida professional association, as Authorized Representative of Member

By: 

David J. Powers, President

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Fax Audit No. B05000132937 3**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 608.415, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST -- The name of the limited liability company is HFN Transportation, LLC.

SECOND -- The name and address of the registered agent and office is:

David J. Powers, P.A.
7777 Glades Road
Suite 300
Boca Raton, Florida 33434

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.

Dated this 26th day of May, 2005.

REGISTERED AGENT:

DAVID J. POWERS, P.A., a Florida
professional association

By: 

David J. Powers, President

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