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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

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TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

THOMAS HARTZOG LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

THOMAS HARTZOG LLC

ARTICLE II ADDRESS

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

P.O. BOX 540098
MERRITT ISLAND, FL 32954

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

THOMAS HARTZOG
3620 NORTH INDIAN RIVER DRIVE
COCOA, FLORIDA 32738

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Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



THOMAS HARTZOG / Registered Agent's Signature

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a Manager Managed Company.

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ARTICLE V

The name(s), address(es), and title(s) of the directors and officers:

THOMAS HARTZOG
MANAGER: 720 OUTRIGGER DRIVE
DELTONA, FLORIDA 32738



Signature of a member or 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.)

THOMAS HARTZOG
Typed or printed name of signee

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