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TALLAHASSEE, FLORID

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: HBL Enterprises L. (Name of Limite	L.C. d Liability Company)	
The enclosed Articles of Organization and fee(s) are st	ubmitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Brad Moulder	Name of Person)	· · · · · · · · · · · · · · · · · · ·
HBL Enterprises	Firm/Company)	
5132 Meadowlark	Lane (Address)	05 TALL
Tallahussee, FL (City)	State and Zip Code)	5 JUL 18 PH
For further information concerning this matter, please of	call:	
Harry Huff (Name of Person)	at (<u>850</u>) <u>562</u> ~ (Area Code & Daytime Te	376)
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:	MAILING A	DDRESS:

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:	
HBL Enterprises L.L.C.	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5132 Meadowlark Lane. Igliahussee, FL 32303	5132 Meadowlark Lane Talkhassee FL 32303
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	egistered agent are:
Name	Air 18
5132 Meads Wlar Florida street add	ress (P.O. Box NOT acceptable)

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)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Harry Huff 5132 Medowlark Ln. Tallahassee, FL 32303
MGRM_	Brad Moulder 5132 Meadowlork Lh. Tallahassee, FL 32303
(Use attachment if necessary)	ALL AHAS
NOTE: An additional article must be a	dded if an effective date is requested:
(In accordance with section of this document constitutes that the facts stated herein	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)

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)