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(Requestor's Name)			
Alina & Janusz Stempnowski 10105 Hatteras Ct Fort Myers FL 33919			
(Address)			
(City/State/Zip/Phone #)			
(orginalization)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(Cooking)			
Certified Copies Certificates of Status			
Considerations to Filipp Officer			
Special Instructions to Filing Officer: 700 FT LC			
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Office Use Only			



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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 5, 2005

ALINA & JANUSZ STEMPNOWSKI 10105 HATTERAS CT FORT MYERS, FL 33919

SUBJECT: HOJAN LLC

Ref. Number: W05000032315

We have received your document for HOJAN LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to vou.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 505A00044645

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations						
SUBJECT: HOJAN LLC						
(Name of Limited Liability Company)						
The enclosed Articles of Organization and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
JANUSZ STEMPNOWSKI						
(Name of Person)						
(Firm/Company)						
10105 Hatteras CT	-					
(Address)						
Fort Myers F1.33919 (City/State and Zip Code)						
(City/State and 2.19 code)						
For further information concerning this matter, please call:						
Janusz Stempnowski	100					
(Name of Person) at (239) 437 8127 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & Certificate of Status	☐ \$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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

HOJAN 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:

10105 Hatteras CT.

Fort Myers F1.33919

10105 Hatteras Ct

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

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

JANUSZ STEMPNOWSKI

Name

10105 HATTERAS CT

Florida street address (P.O. Box NOT acceptable)

FORT MYERS

S FL 33919
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..

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Janusz Stempnowski 10105 Hatteras Ct
MGRM	Long Hing Inc 2130 Huntington Drive #307 S.Pasadena CA 91030
(Use attachment if necessary)	
NOTE: An additional article must l	oe added if an effective date is requested.
REQUIRED SIGNATURE:	

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.)

Janusz Stempnowski
Typed or printed name of signee

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)