

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

LIMITED LIABILITY COMPANY

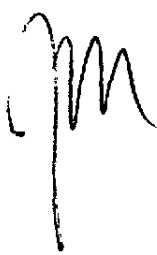
HTE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **HTE, LLC.**

ARTICLE II - Address:

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

Principal Office Address:

4705 N Rome Avenue

Tampa, FL, 33603

Mailing Address:

4705 N Rome Avenue

Tampa, FL, 33603

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

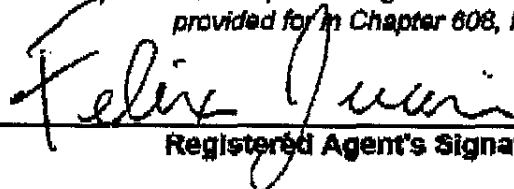
The name and the Florida street address of the registered agent are:

Felix Juan
Name

4705 N Rome Avenue.
Florida Street address (P.O. Box NOT acceptable)

Tampa, FL, 33603
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.



Registered Agent's Signature

05 AUG 17 AM 9:26
FILE
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

Manager

Felix Juan
4705 N Rome Avenue

Tampa, FL, 33603

Managing Member

George Fernandez
4705 N Rome Avenue

Tampa, FL, 33603

Managing Member

Joe Smvota
4705 N Rome Avenue

Tampa, FL, 33603

Managing Member

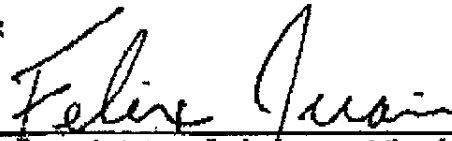
Carlos Villareal
4705 N Rome Avenue

Tampa, FL, 33603

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

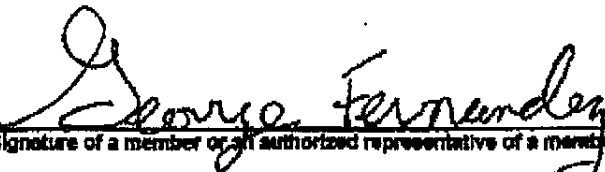


Signature of a member or an authorized representative of a member.

(In accordance with section 608.40(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

PELIX JUAN

05 AUG 17 AM 9:26
TALLAHASSEE, FLORIDA



Signature of a member or an authorized representative of a member.

(In accordance with section 808.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

GEORGE FERNANDEZ



Signature of a member or an authorized representative of a member.

(In accordance with section 808.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CARLOS VILLAREAL



Signature of a member or an authorized representative of a member.

(In accordance with section 808.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOE SMYOTA

SECRET
TALLAHASSEE, FLORIDA

05 AUG 17 AM 9:26