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TO:

Registration Section
Division of Corporations

SUBJECT: CREATIVE BUILDER INVESTOR SOLUTIONS, 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:

7	_	_	•
GARRY J	IEAN-LOUIS		
	<u> </u>	Vame of Person)	
CREATIV	E BUILDER INVE	ESTOR SOLUTIO	NS, LLC
	0	Firm/Company)	
2695 NW	95 TERRACE		
		(Address)	
CORAL	SPRINGS, FL 3	3065	
	(City)	State and Zip Code)	
For further information	concerning this matter, please	call:	
GARRY JEAN	-LOUIS	at (954) 253-94	31
	of Person)	(Area Code & Daytime T	
Enclosed is a check for	or 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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tollohossee, FI 32314	Street/Courier Addre Registration Section Division of Corporation Clifton Building	ons

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

CREATIVE BUILDER INVESTOR SOLUTIONS, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
2695 NW 95 TERRACE	2695 NW 95 TERRACE	
CORAL SPRINGS, FL 33065	CORAL SPRINGS, FL 33065	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an individual or another registered agent are:	
GARRY JEAN-LOUIS	OS SEP TALLAH	
Name		1
2695 NW 95 TERRAC		
Florida street ad	ddress (P.O. Box NOT acceptable)	31
CORAL SPRINGS,	ddress (P.O. Box NOT acceptable) FL 33065 and Zip RDF STATE 43	
City, State,	FL 33065 FLORIDE H3	
	P	

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 (REQUIRED)

(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	Name and Address:
"MGRM" = Managing Mem	iber
MGRM	GARRY JEAN-LOUIS
	2695 NW 95 TERRACE
	CORAL SPRINGS, FL 33065
	· · · · · · · · · · · · · · · · · · ·

(Use attachment if necessary	/)
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)