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COVER LETTER

TO: Registration Section Division of Corporations The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: 38th Street Apt #91 For further information concerning this matter, please call: Enclosed is a check for the following amount: ☐ \$155.00 Filing Fee & ▼ \$160.00 Film □ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The	name	of	the	Limite

ARTICLE I - Name:

of the Limited Liability Company is:

3160 BENTR TNVESTMENTS 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:
152 N.E. 38th st. Apt #91 Cokland Buk, FL 33334	158 N.E. 384 St. 10t#91 Oakland Park, FL 33334
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.) The name and the Florida street address of the	gistered Agent. You must designate an individual or another
^	REDATT SE
158 N.E. 38th 3 Florida street a	ddress (P.O. Box NOT acceptable)
OAKLAND PARK	FL 33334

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	PATRICIA PREUATT 152 N.E. 38th St. Apt#91 OAKLAND PARK, FL 33334
MGRM	ADRAIN JOHNSON 2995 EVENSMILL Rd. RITHONIA, G.A. 30058
·	
	2005 E
(Use attachment if necessary)	NHAS
TCLE V: Effective date, if other than the a effective date is listed, the date must b 90 days after the date of filing.)	e date of filing: (OPDONAL) e specific and cannot be more than five business days pr
REQUIRED SIGNATURE:	ξF 33

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

A PREVATT
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)