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COVER LETTER

TO: Registration Se Division of Co				
SUBJECT:	Property - (Name of Limite	Ink, LLC ad Liability Company)		
The enclosed Articles o	f Organization and fee(s) are s	submitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
	<u>Kaleb</u>	Havrell Name of Person)		
E	nterpreneurial	Harrell Name of Person) Investments (Firm/Company)	LLC	·
0	627 E Marks	St. (Address) 32803 /State and Zip Code)		2005
	orlando, Fl	32803		2005 DEC 28 PM 4: 51
	(City	/State and Zip Code)		
	concerning this matter, please			PH 4: 54
Kaleb He	wrll	at (407 810.9) (Area Code & Daytime To	046	5
		(code & Dayame 1	orephone (vantoer)	
	r the following amount:			
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing 1 Certificate of Status Certified Copy (additional copy is enclosed)	s &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Property Ink, (Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
627 E Marks St. Oxfando, FC 32803	627 E Marks St. Orlander, FL 32803
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registerus business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Kaleb Ha	xxel (S 🕺

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..

627 E Marks St.

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

Registered Agent's Signature (REQUIRED

(CONTINUED) Page 1 of 2

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	er
MGRM	Entrepreneurial Investments, LLC 627 & Martis St. Orlando, FL 32803
MGRM	Kalib Harrell 627 E Marks St. orlando, EL 32903
MGRM	Wayne Yung G27 € Marks St. S = Su.
	S DEC, 23
	TE CONTRACTOR OF THE CONTRACTO
(Use attachment if necessary)	
CLE V: Effective date, if other the	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior
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CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) REQUIRED SIGNATURE:	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume	han the date of filing: (OPTIONAL)
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume that the facts	than the date of filing:

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

\$125.00 Filing Fee for Articles of Organization and Designation

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