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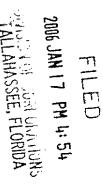
(Rec	questor's Name)	
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Special Instructions to F	Filing Officer:	





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## **COVER LETTER**

TO: Registration Se Division of Co			
SUBJECT:	Hong Da.	ng, LLC d-Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
	Hong D	4ng Name of Person)	
	Hong Day	eg, LLC Em Company)	-
	6715 V	illage Gro	ve Ct &
	Tampa	FL 336/5  'State and Zin Code)	T LE
For further information	concerning this matter, please	call:	PH FIGURE
Hong	Dang of Person)	at ( 8/3 ) 334- (Area Code & Daytime T	-2150 Elephone Number)
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	Street/Courier Address Registration Section	

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
(15c) 345-6051

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6715 Village Grove Ct. Tampa, FL 33615	6715 Village Grove Ct. Tampa, FL 33615
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re-	egistered agent are:
Kenneth C.	Trang E
	earl Ave.  ress (P.O. Box NOT acceptable)
Tampa City, State, a.	T. 336// 55

accept the obligations of my position as registered agent as provided for in Chapter 608. F.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

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<b>Title:</b> "MGR" = Manager "MGRM" = Managing M	Name and Address:  Member	
MGRM	Hong Dang 6715 Village G Tampa, FL	5rove Ct. 33615
· · ·		The state of the s
(Use attachment if necess	ssary)	
LE V: Effective date if c	other than the date of filing: e date must be specific and cannot be mo ling.)	re than five business of
fective date is listed, the days after the date of fil	URE:	-
fective date is listed, the	URE:	
fective date is listed, the days after the date of fil	True Shu	ve of a member.
fective date is listed, the days after the date of fil  REQUIRED SIGNATU  Signatu  (In according)	URE:  ure of a member or an authorized representation ordance with section 608.408(3). Florida Statutes document constitutes an affirmation under the per	, the execution

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)