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COVER LETTER

TO:	Registra Division			ons										
SUBJE	CT:	<u>C</u>	ę	H				EN ility Con			LS i	E3	LLC	
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The enc	closed Art	icles of	Organ	nizatio	n and fe	e(s) are s	ubmit	ted for fil	ing.					
Please r	eturn all	correspo	ndeno	e con	cerning t	his matte	er to th	e followi	ing:					
.	(LLA	IRE	3	. HA	3801	<u> </u>			·			· <u>-</u>	
						(Name (of Person)	•					
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						((Firm/C	Company)						
	1855 W PALMETTO PARK RD #283													
							(Ad	dress)						
	BOCA RATON FL 33486													
						(City	/State a	and Zip Co	ođe)					
For furt	her inforr	nation c	oncer	ning tl	is matte	r, please	call:							
CU	aire	HA	NS:	<u> </u>	-	·····	at (561	_)_	400	- 9	401		_
	CLAIRE HANSON (Name of Person)					at (Stat) 400 - 9401 (Area Code & Daytime Telephone Number)								
Enclose	ed is a ch	eck for	r the f	ollow	ing amo	ount:								
⊠ \$125.	.00 Filinį	g Fee	□ \$ Cert	130.0 ificate	0 Filing e of Stat	; Fee & us	Cer	\$155.00 tified Co itional cop	эру			_ Certific Certifi	0.00 Filine ate of Sted Copy all copy is	atus &
			Regi Divi P.O.	istration of Box (ddress in Section of Corpor 5327 se, FL 32	rations		Registr Division Clifton 2661 E	ration S on of C a Build Executi	Corporati	ions er Ci	rcle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C & H HANSON ENTERPRISES 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:					
1355 W PALMETTO PARK RD #283 BOCA RATON FL 33486 BOCA RATON FL 33486					
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)					
The name and the Florida street address of the registered agent are:					
CLAIRE S. HANSON					
Name					
1355 W PAUMETTO PARK RD #283 Florida street address (P.O. Box NOT acceptable)					
BOLA RATON FL 33486					
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					

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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				
MGR	HOWARD P. HANSON 1355 W PALMETTO PARK RD #283 BOCA RATTON FL 33486			
MGR	CLAIRE S. HANSON 1355 W PALMET TO PARK RD #283 BOCA RATON FL 33486			
	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior			
to or 90 days after the date of filing.)	specine and exhaot be more than live business days prior			
REQUIRED SIGNATURE:				
Clair S.	· · · · · · · · · · · · · · · · · · ·			
_	or an authorized representative of a member.			
(In accordance with section 608.408(3), Florida Statutes, the execution				

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)

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CLAIRE S. HANSON
Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury