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COVER LETTER

Division of Corp				
SUBJECT: RO	Name of Limite	Denuale, d Liability Company)	LLC	
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspo	ndence concerning this matte	er to the following:		
	alan ot	Name of Person)		
	alanm.	Sty aca	unting	
	39305	LULE (Address)	F.	SAY!
	Brack	State and Zip Code)	34208	PILED PILED OF STATE OF STATE OF STATE
For further information co	ncerning this matter, please	call:		高 2
	f Person)	at (Area Code & Daytime To	elephone Number)	
Enclosed is a check for	the following amount:			
	\$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 Tallahassee, FL 32314	Street/Courier Address 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:

ARTICLE II - Address:

The maining address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:		
90622ndArcw Palmetto, Flouzzi	Palmeto, FL34227		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)			
The name and the Florida street address of the re	egistered agent are:		
Robert Win	Benware		
900 sond -	ress (P.O. Box NOT acceptable)		

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 "MGRM" = Managing Member Check L. Benuare Gao 22nd Aycu Palmatho, Flatal

. (OPTIONAL)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

ARTICLE V: Effective date, if other than the date of filing:

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 that the facts stated herein are true.)

Typed or printed name of signee

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

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)

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: RO	OCK - W E	Denwane, d Liability Company)	LLC	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.		
Please return all correspo	ndence concerning this matte	r to the following:		
	alan st	Name of Person)		•
	alanm.	Sky aca	inling ?	06 MAY 18
	39305	RIQUE (Address)		MII. 12
	Brader	State and Zip Code)	34208	
For further information co	oncerning this matter, please of	call:		
<u> </u>	Person)	at (CUL) JUG. (Area Code & Daytime Te	- 530U lephone Number)	
Enclosed is a check for	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 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns .	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Pahentus Bonume	110	

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

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:

Mailing Address:

90622nd Arcw GOG22nd Palmetto, FL34221 Palmeto, 1

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:

Robert W Berware

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

Palmetto FL 34221

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 "MGRM" = Managing Member Robert W. Bennare Gal 22nd Arciv Palmation Flavore Palmation Flav

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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 that the facts stated herein are true.)

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Typed or printed name of signee

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)