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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	Herno Cycles (Name of Limite	LLC d Liability Company)		
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspondent	ondence concerning this matte	er to the following:		
63	ward Rosent	thal		_
	()	Name of Person)		
	^ -	LLC Firm/Company)		_
	(Firm/Company)		
341	105 Nashua		7	-
		(Address)	ZEC ZEC	
Soc	rento FL	32776-8417	AUG RETA AHAS	# # # # # # # # # # # # # # # # # # #
	(City	/State and Zip Code)	30 RY SEE	r
For further information of	concerning this matter, please	call:	P 12: OF STA SFLOR	
Jacqueline	Rosenthal	at (352) 483-3 (Area Code & Daytime To	100 P 50 P	,
(Hame	or reison)	(Area Code & Daytime 16	nephone Number)	
Enclosed is a check for	r 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 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 Co	ompany is:			
To ferno Cycles (Must end with the words "Limited Liability Com	npany, "Limited Company" or their abbreviation "LLC	c," or "L.C.,")		
ARTICLE II - Address:	es of the principal office of the Limited L	inhility Company is:		
The maining address and street address	ss of the principal office of the Limited L	lability Company is:		
Principal Office Address:	Mailing Address:	Mailing Address:		
34705 Nashua Blvd Sorrento Fi 32776-8	34705 Nashua Bi 3417 Sorrento FL 327	Vd 16-8417		
	Registered Office, & Registered Agent' its own Registered Agent. You must designate an indiv	vidual or another		
The name and the Florida street addre	ess of the registered agent are:	ZOOB AUG SECRETA		
Edward	1 Rosenthal	ARY SSE		
	Name	(1) C		
34705	Nashua Blud	P 12: 1 F STAT		
	ida street address (P.O. Box NOT acceptable)) S 56 R IDA		
_Soment	0 FL 32776-8417	> 5		
	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 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	Manhan	Name and Address:		
"MGRM" = ManagingMGR	iviemoer	Edward Rosenthal 34705 Nashua Blvd Sorrento FL 32776-8	117	
(Use attachment if nec	f other than the da	ate of filing:	SECRETOR ALLAHAUS	2001 AUGS
0 days after the date of REQUIRED SIGNAT	filing.)	specific and cannot be more than five be	OF STA	14498
<	SIN			
_		or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution		
of thi	s document constitute the facts stated her	tes an affirmation under the penalties of perjury		

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)