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| (Requestor's Name) | | | | |
|---|------------------|-------------|--|--|
| . (Address) | | | | |
| (Add | dress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Na | me) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE AS DIVISION OF CORPORATIONS

J: BRYAN JAN 1.6 2007

COVER LETTER

| Division of Co | | | | |
|--------------------------|---|--|---|-------------------|
| SUBJECT: H&G | Services LLC. | | | |
| | | l Liability Company) | <u> </u> | |
| The enclosed Articles of | of Organization and fee(s) are su | ubmitted for filing. | | |
| Please return all corres | pondence concerning this matte | τ to the following: | | |
| John Raz | zack | | | |
| • | 0 | Name of Person) | | |
| CO & C S | Services LLC | | | |
| | (| Firm/Company) | | 可能 |
| 310 Ave | nida De La Vista | | | T JAN 2 PH 2: 1 |
| | | (Address) | | 2 50 |
| Indiatlan | tic FL. 32903 | | | PH 2 |
| | (City. | /State and Zip Code) | | |
| | | | | ن الله |
| For further information | concerning this matter, please | call: | | |
| John Razack | | at (321) 288-62 | 57 | |
| (Nam | e of Person) | (Area Code & Daytime T | elephone Number) | |
| Enclosed is a check f | 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 Certificate of Status Certified Copy (additional copy is ench | s & |
| | 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 | ons r Circle | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| (Must end with the words "Limited | Lishility Company "Lin | mited Company" or their abbreviation "LLC," or "L.C.,") | |
|--|------------------------|--|---------------|
| (Museum Will all Wolds Limited | Englishing Company, Em | mice company of their aboveviation Lie, or Lie, | |
| ARTICLE II - Address: | | | |
| The mailing address and str | reet address of the | principal office of the Limited Liability Com | pany is: |
| Principal Office Address: | 1 | Mailing Address: | , <u>P</u> |
| 310 Avenida De La Vista | | 310 Avenida De La Vista | 1 SEC |
| Indiatlantic Fl. 32903 | | Indiatlantic Fl. 32903 | 至 三二 |
| | | | SIGNET SIGNET |
| business entity with an active Flori The name and the Florida s | ida registration.) | egistered Agent. You must designate an individual or another the registered agent are: | 2 PH 2: 17 |
| | Nam | me | |
| 0400 1 | Palm Ave. | | |
| 2180 i | Florida street a | address (P.O. Box NOT acceptable) | |
| <u> 2180 I</u> | 1 101144 54441 1 | address (1.0. Dox 1.0.1 deceptable) | |
| 2180 I | | FI. 32903 | |
| | antic | • | |

(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: "MGR" = Manager | Name and Address: | |
|--|--|---------------------------|
| "MGRM" = Managing Member Hazib Razack | 310 Avenida De La Vista Indiatlantic FL 32903 | _ |
| Greg Sipus | 481 Vine Street West Melbourne FL. 32904 | |
| | | BIVISION |
| | | T JAN 12 PH 2: 1 |
| (Use attachment if necessary) | | PH 2: 17 |
| ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.) | be specific and cannot be more than five busine | ΓΙΟΝΑL) ess days prior |
| REQUIRED SIGNATURE: | | |
| (In accordance with s | section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury I herein are true.) | |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)

GREGORY SIPUS
Typed or printed name of signee