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October 4, 2007

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Helmet of Hope, LLC

Filing Evidence

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include
Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

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NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

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**ARTICLES OF ORGANIZATION
OF
HELMET OF HOPE, LLC**

Pursuant to the Florida Limited Liability Company Act, Chap. 608, Florida Statutes, as amended from time to time (the "Act"), the following are adopted as the Articles of Organization of the limited liability company organized hereby:

ARTICLE I - NAME

The name of the limited liability company (the "Company") shall be Helmet of Hope, LLC.

ARTICLE II - ADDRESS

The mailing address of the Company shall be Post Office Box 56712, Jacksonville, Florida 32241 and the street address of the principal office of the Company shall be 1913 Belle Angeline Court, Jacksonville, Florida 32223.

ARTICLE III - REGISTERED AGENT

The initial registered office of the Company shall be 1515 Riverside Avenue, Suite A, Jacksonville, Florida 32204 and its initial registered agent at such office shall be Kristopher D. Robinson.

ARTICLE IV - ADDITIONAL MEMBERS


Additional members (as the term "member" is defined in §608.402(21) of the Act) may be admitted at such times and on such terms and conditions as provided in the Operating Agreement.

ARTICLE V - MANAGEMENT OF THE COMPANY

The Company will be a manager-managed company managed in accordance with and subject to the requirements of the Act and the Operating Agreement of the Company. The name and addresses of the initial sole manager of the Company is as follows:

<u>Manager</u>	<u>Address</u>
Mel Johnson	Post Office Box 56712 Jacksonville, Florida 32241

Dated this 3rd day of October, 2007.




Kristopher D. Robinson,
Authorized Representative

**CERTIFICATE DESIGNATING REGISTERED OFFICE AND REGISTERED
AGENT FOR THE SERVICE OF PROCESS WITHIN FLORIDA**

In compliance with Chapter 608, Florida Statutes, as amended from time to time (the "Act"), the following is submitted:

Helmet of Hope, LLC, desiring to organize or qualify under the laws of the State of Florida as a limited liability company pursuant to the Act, hereby designates Kristopher D. Robinson as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 1515 Riverside Avenue, Suite A, Jacksonville, Florida 32204, as its agent to accept service of process within the state.

DATED this 3rd day of October, 2007.



Kristopher D. Robinson,
Authorized Representative

Having been named as registered agent to accept service of process for the above stated limited liability company, at the place designated in this certificate, I hereby agree to 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.

DATED this 3rd day of October, 2007.



Kristopher D. Robinson