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COVER LETTER

Division of Corporations				
SUBJECT: Candlewood, LLC				
(Name of Limited Liability Company)				
The enclosed Articles of Organization and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
James G. Hahl, Esquire				
(Name of Person)				
Van Houten, Ponder & Hahl, P.A.				
(Firm/Company)				
114 South Palmetto Avenue				
(Address)				
Daytona Beach, FL 32114				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
James G. Hahl at (386) 257-1777				
(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
S125.00 Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)				
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KITCLES OF ORGANIZATION FO	A PLOKINA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Compa	nny is;
Candlewood, LLC	
(Mint end with the words "Lanite	d Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address:	
	the principal office of the Limited Liability Company is
Principal Office Address:	Malling Address:
5540 W. Bayshore Drive	5540 W, Bayshore Drive
Harbor Oaks, FL 32127	Harbor Oaks, FL 32127
	stered Office, & Registered Agent's Signature: a Registeral Agent. You must designate an individual or another
The name and the Florida street address o	(the registered agent are;
Marcia Anello	•
	Name.
<u>5540 W. Bays</u>	shore Drive
Florida str	rect address (P.O. Box <u>SOT</u> acceptable)
Harbor Oaks,	FL 32127
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 Supremer (REQUIRED)

OR LEND SOUPORACION

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	then are peness.	
"MGRM" Managing Me	mber	
MGRM	Marcia Anello	
	5540 W. Bayshoro Drive	-
	Harbor Oaks, FL 32127	
		_
		
filter manufacture of the constraint		
(Use attachment if necessar		
ICLE V: Effective date, if an	her than the date of filing: (OP) ate must be specific and cannot be more than five busing	ΠΟΝΆΙ.) ess days neilor
90 days after the date of filir		and the same of the same of
REQUIRED SIGNATUE	or.	
REQUIRED SIGNATUR	· /	
71	Jarcia anello	
Signature	of a member or an authorized representative of a member.	
of this do	tance with section 608,408(3), Florida Statutes, the execution cument constitutes in affirmation under the penalties of perjury facts stated herein are true.)	
	cia Anello	_ 0
	Typed or printed name of signee	
Filing Fees:		DIVISION OF 08 JAN 3
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VISION OF CORPORATION SI

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)