

W8000019271

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
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H08000  
FLORIDA/FOREIGN LIMITED LIABILITY CO.

H &amp; I Invest LLC

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EXAMINER

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

H &amp; I INVEST LLC

**ARTICLE II ADDRESS**

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

6647 110TH AVE NORTH

ROYAL PALM BEACH, FLORIDA 33411

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &****REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

A1A REGISTERED AGENT INC.

5647 110TH AVE NORTH

ROYAL PALM BEACH, FLORIDA 33411

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 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..

*Ima Phabkha Thakri* PRES. 2/22/08

A1A REGISTERED AGENT INC. / Registered Agent's Signature

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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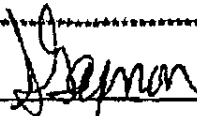
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PAGE 2 H & I INVEST LLC

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

Forsythe Group Corp.  
50th Street, Global Plaza Tower  
19th Floor, Office H  
PO Box 0834-0987  
Panama, Republic of Panama

x 

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.

Jeff St-Laurent

Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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