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Special Instructions to Filing Officer:		

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corpora				
SUBJECT: SOH	(Name of Limited Liability Company)	E, LLC.		
The enclosed Articles of Organization and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
BRID	GET SOHL			
	(Name of Person)			
SOHL COMPLIANCE, LLC.				
5460		DRIVE		
·				
PALM BI	EACH GAR DENS (City/State and Zip Code)	, FL 33418 &		
(City/State and Zip Code)				
For further information concerning this matter, please call:				
BRIDGET (Name of Pers	<u> </u>	FL 33418 & PR 2:55 4-8442 ime Telephone Number)		
Enclosed is a check for the following amount:				
S125.00 Filing Fee S1 Ce	30.00 Filing Fee & Status Status Status Status Certified Copy (additional copy is enclosed)	Certificate of Status &		
Reg Div P.O	ling Address istration Section ision of Corporations Box 6327 ahassee, FL 32314 Street/Courier Ad Registration Section Division of Corporations Clifton Building 2661 Executive C Tallahassee, FL 3	on orations Center Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:				
SOHL COMPLIANCE, LLC.				
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
5460 EAGLE LAKE DRIVE F ALM BEACH GARDENS, PL FL 33418 F	5460 EAGLE LAKE DRIVE ALM BEACH GARDENS, L 33418			
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)				
The name and the Florida street address of the regi	stered agent are:			
BRIDGET SC)HL SSE P			
Name	FL S			
5460 EAGLE LA	KE DRIVE S S			
	s (P.O. Box NOT acceptable)			
PALM BEACH GARDENS	<u> 133418</u>			
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)

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.) Typed or printed name of signee Filing Fees:

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

\$125.00 Filing Fee for Articles of Organization and Designation

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