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(Requestor's Name)	
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PICK-UP WAIT MAIL	
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Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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## **COVER LETTER**

Division of Co			
<sub>SUBJECT:</sub> Brand	yhill.net, LLC		
Senetic	(Name of Limit	ed Liability Compa	any)
The enclosed Articles o	f Organization and fee(s) are	submitted for filing	3.
Please return all corresp	ondence concerning this mat	ter to the following	:
Michael H	. Bartlett		
		(Name of Person)	
Brandyhill	.net, LLC		
		(Firm/Company)	
4301 SW	105 Ave		
		(Address)	
Davie FL			
	(Cit	ty/State and Zip Code	9)
For further information	concerning this matter, pleas	e call:	
Michael H. Bar	tlett	at ( 954	, 916-1938
	of Person)	_ ai (	e & Daytime Telephone Number)
Enclosed is a check for	or the following amount:		
▼\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	py Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations suilding ecutive Center Circle see, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company	, ia.	
The name of the Elimed Elability Company	/ 15.	
Brandyhill.net, LLC		
(Must end with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of th	e principal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
4301 SW 105 Ave	4301 SW 105 Ave	
Davie FL 33328	Davie FL 33328	
4301 SW 105 Ave	Registered Agent. You must designate an individual he registered agent are:  t ame  t address (P.O. Box NOT acceptable)	Signature:  08 OCT - 1 AM 10: 59  Mail or ALLAHASSEE FLORIDA
	FL ate, and Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as a Registered Agent's Signature	in this certificate, I hereby accept the acity. Yurther agree to comply with be performance of my duties, and I am	e appointment as the provisions of all familiar with and

(CONTINUED) Page 1 of 2

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

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

"M(ik" = Manager	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGR	Michael H. Bartlett	
	4301 SW 105 Ave	
	Davie FL 33328	
	· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)		
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effective date is listed, the date must 20 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a met of this document of this document of the date	st be specific and cannot be more than five business da  ALLARY  ABECATION  A	ıys pri

Filing Fees:

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

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