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DIVISION OF CORPORATIONS
09 OCT - 5 AM 10:50

B. KOHR

OCT - 7 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T.R.U.S.T. and Relief Housing Development, 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:

Rebecca Clark-Louis

Name of Person

Firm/Company

P.O. Box 163824

Address

Miami, FL 33116

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Clark-Louis

Name of Person

at (786)

768-1577

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
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DIVISION OF CORPORATIONS
09 OCT - 5:41 PM '00

ARTICLES OF ORGANIZATION

FOR

T.R.U.S.T. AND RELIEF HOUSING DEVELOPMENT, LLC

ARTICLE I

Name

The name of the Limited Liability Company is as follows:

T.R.U.S.T. AND RELIEF HOUSING DEVELOPMENT, LLC

ARTICLE II

Principal Office

The principal place of business and mailing address of the Limited Liability Company is:

**11945 SW 173 Terrace, Miami, FL 33177
Mailing: P.O. Box 163824, Miami, FL 33116**

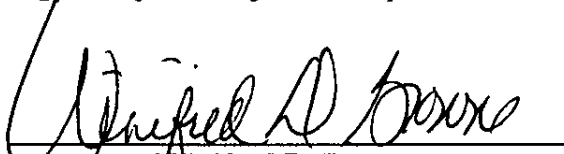
ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature:

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

**Winifred D Browne
312 NE 55TH TERRACE
Miami, FL 33137**

Having been named as Registered Agent and to accept services of process for the above stated incorporation 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.

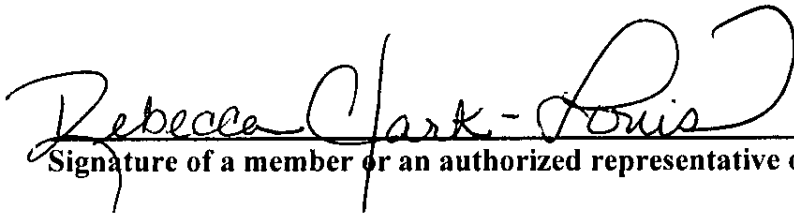

Winifred D. Browne

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CLERK OF STATE
DIVISION OF CORPORATIONS
09 OCT -5 AM 10:50

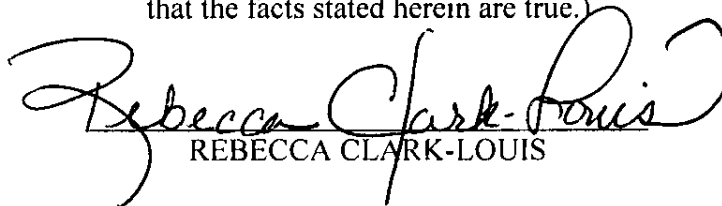
ARTICLE IV
Manager(s) or Managing Member(s)

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

<u>Title:</u>	<u>Name and Address</u>
REBECCA CLARK-LOUIS, MGR	P.O. Box 163824 Miami, FL 33116
TERRENCE W. LOUIS, MGRM	P.O. Box 163824 Miami, FL 33116
GERALDINE CLARK, MGRM	P.O. Box 163824 Miami, FL 33116


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.)


REBECCA CLARK-LOUIS