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DEC -1 2009

**EXAMINER** 



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SECRETARY OF STATE DIVISION OF CORPORATION

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: C & H Global Solutions 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:	
Carla Drake Name of Person	
Firm/Company	
4008 69TD ST.E.	
Address	
Palmetto, FL 34221 City/State and Zip Code	
Carladucky a amil. Com  E-mail address: (to be used for future annual report notification)	<u> </u>
For further information concerning this matter, please call:	
Carla Drake at 941 238-7331  Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Cocy (additional copy is enclosed)} Certified Cocy (additional copy is enclose	f Status &

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



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE II - Name: The name of the Limited Liability Company is: CEH GOOD Solutions 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: Walling Address: Palmetto, FL 34221 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Carla Draice

Name

4008 1974 ST E.

Florida street address (P.O. Box NOT acceptable)

Palmetto FL 3421

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)

(CONTINUED)

# Page 1 of 2

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

	Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
	MGR	HENRY IKONEN 4008 169 TH ST. E. Palmetto, FL 34221			
	MGR	Carla Drake 400 8 LATT ST.E. Palmetto, FL 34221			
	<del></del>				
(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 o 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:	Control Carrier of Digital			
	\$125.00 Filing Fee for Articles of Organization and Designation				

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)