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Manhakins, L.L.C.

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITECRETARY OF STATE COMPANY

### ARTICLE I. NAME

The name of the limited liability company shall be:

Manhakins, L.L.C.

#### ARTICLE II. ADDRESS

The principal place of business of this limited liability company shall be:

551 Ave. K. SE, Winter Haven FL 33880

# ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE:

The name and address of the registered agent and office is Kinsey R. Brown, 551 Ave. K. SB., Winter Haven, FL 33880.

SIGNATU	RECLEWELL R	Brown
TITLE Manager		
DATE	1-21-11	

Prepared by Ronald A. Brown & Associates, P.A. P. O. Box 999, Winter Haven, FL 33882-0999

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statutes.

DATE 1-21- 11

#### ARTICLE IV. MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company.

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

Title:

Name and Address:

Manager

Kinsey R. Brown

551 Ave. K. SE

Winter Haven, FL 33880

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SECRETARY OF STATE TALE AHASSEE, FLORIDA

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statues, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

Kinsey R. Brown

Typed or printed name of signee