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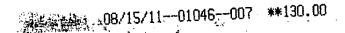
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EFFECTIVE DATE 8/12/11



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D. BRUCE

AUG 16 2011

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Holy Matrimony Wedding Village "L.L.C. 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:
Jametta R. Davis Name of Person
Holy Matrimony Wedding Village "L.L.C."
8075 Ramsgate Rd.
Jackson ville, 4. 32208 E
Keyweddings ohot mail. Com E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vame Ha R. Davis at 984 4663825 57 Name of Person at 984 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$ Certificate of Status \$\text{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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Holy Matrimony Wedding Village Lik. C." (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: 1527 Gandy St. Jacksonwille, H. 32208 Mailing Address: 8075 Ramsgate Rd. Jacksonwille, H. 32208
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: Jame
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

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 8/12/11

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

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

Name and Address:
Jametta R. Davis 8075 Ramsaate Rd. Sack sonville, 91, 32208
Willie Davis St. 3075 Ramsgute Rd. Sacksonville, 71, 32208
e date of filing: 8-13-2011. (OPTIONAL) be specific and cannot be more than five business days prior
be specific and cannot be more than five business days prior ber or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document
Description and cannot be more than five business days prior be specific and cannot be more than five business days prior ber or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. It is mation submitted in a document to the Department of State or as provided for in s.817.155, F.S.)
be specific and cannot be more than five business days prior or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. The remaining submitted in a document to the Department of State

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

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