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| (Business Entity Name) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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COVER LETTER

| TO: Registration Division of | Section Corporations | | | |
|--|---|--|---|--|
| SUBJECT: HD & CHG LLC | | | | |
| Name of Limited Liability Company | | | | |
| The enclosed Articles | of Organization and fee(s) are | e submitted for filing. | | |
| Please return all corre | spondence concerning this mat | tter to the following: | | |
| Gary J (| Guastella_ | | | |
| | | Name of Person | _ | |
| Harbco | Development LLC | | | |
| Firm/Company | | | | |
| 3700 34th Street, Suite 300 | | | | |
| | | Address | | |
| Orlando, FL 32805 | | | | |
| City/State and Zip Code | | | | |
| garyg@harbco.com E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| A. Tom Harb | | at (407) 383-9600 | | |
| Nam | e of Person | Area Code & Daytime Telephone Number | | |
| Enclosed is a check for the following amount: | | | | |
| \$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) 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 | | |

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Comp | Nany is: | |
|---|--|--------------------------|
| The name of the Emmed Elability Comp | any is. | |
| HD & CHG LLC | | |
| (Must end with the words "Limi | ted Liability Company, "L.L.C.," or "LLC." |) |
| ARTICLE II - Address: | | |
| The mailing address and street address o | of the principal office of the Limit | ed Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 3700 34th Street | 3700 34th Street | |
| Suite 300 | Suite 300 | |
| Orlando, FL 32805 | Orlando, FL 32805 | |
| ARTICLE III - Registered Agent, Reg The Limited Liability Company cannot serve as its o business entity with an active Florida registration.) | | |
| The name and the Florida street address | of the registered agent are: | SEP |
| A. Tom Harb | | P 26 NASSEE |
| | Name | TO E |
| 3700 3/th St | reet Suite 300 | |

Florida street address (P.O. Box NOT acceptable) FL 32805 City, State, and Zip Orlando

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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Harbco Development LLC 3700 34th Street, Suite 300 Orlando, FL 32805 **MGRM** Corporate Holdings Group Inc. PO Box 1788 Lewisburg, WV 34901 (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 to 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 documents constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) A. Tom Harb Typed or printed name of signee 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)