## L13000/21715

(Re	equestor's Name)	
, (Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B)	usiness Entity Nan	ne)
	,	
(De	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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DEPARTFRENT OF STATE

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IUR SERVIGE GUMPARI	
ACCOUNT NO. : 12000000195	
REFERENCE: 778223 8941A	
AUTHORIZATION :	
AUTHORIZATION:  COST LIMIT: \$ 125	
ORDER DATE : August 27, 2013	
ORDER TIME : 11:53 AM	
ORDER NO. : 778223-005	
CUSTOMER NO: 8941A	
DOMESTIC FILING	
NAME: HUDLETT RACING GROUP LLC	
EFFECTIVE DATE:	; ; ; ; ; ; ; ; ; ;
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Harry B. Davis - EXT. 2926	
EXAMINER'S INITIALS:	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	vame: Limited Liability Company i	s:			
Hudlett Racing Grou	sp LLC				
	(Must end with the words "Limited Lia	ibility Company, "L.L.C.," or "LLC.")			
ARTICLE II - The mailing add		principal office of the Limited Lia	ability Co	mpan <u>ı</u>	y is:
Principal Office	e Address:	Mailing Address:			
5079 North Dixie Hi	ghway	Same			
Apt 113					
Oakland Park, FL 3	3334				
The name and th	e Florida street address of the	e registered agent are:	SECRE	2013 AUG	Ra Ar
	Nan	ne .	25 A	627	دور معتو
•	1313 South Andrews Ave		SEE O		j Par
	Florida street a	address (P.O. Box NOT acceptable)			ii i~**
	FT. Lauderdale	33316 ·		<b>P</b>	پ. و
	City,	State, and Zip	Dim.	23	
liability comp registered ages all statutes rei	pany at the place designated in nt and agree to act in this cape ating to the proper and compl	o accept service of process for the n this certificate, I hereby accept the acity. I further agree to comply will be performance of my duties, and registered agent as provided for in	he appoint ith the pro ! I am fami	ment d vision. iliar w	as s of rith
	/s/Bruce D. Gr	een			

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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 Mer	nber
MGRM	
	Jeff Hudlett
	5079 North Dixie Highway, Apt 113
	Oakland Park, FL 33334
MGRM	
	Guido Duerbaum
	5021 Pierce Street
	Hollywood, FL 33021
(Use attachment if necessar	v)
(Use attachment if necessar	у)
	• /
CLE V: Effective date, if other	er than the date of filing: (OPTIONAL)
CLE V: Effective date, if other	er than the date of filing: (OPTIONAL)  date must be specific and cannot be more than five business
CLE V: Effective date, if other	er than the date of filing: (OPTIONAL)  date must be specific and cannot be more than five business
CLE V: Effective date, if other	er than the date of filing: (OPTIONAL)  date must be specific and cannot be more than five business
CLE V: Effective date, if other effective date is listed, the coor 90 days after the date of	er than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business of filing.)
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CLE V: Effective date, if other effective date is listed, the coor 90 days after the date of the date	er than the date of filing:  date must be specific and cannot be more than five business of filing.)  E:  /s/Jeff Hudlett
CLE V: Effective date, if other effective date is listed, the coor 90 days after the date of the date	er than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business of filing.)  E:
CLE V: Effective date, if other effective date is listed, the coor 90 days after the date of the date	er than the date of filing:
CLE V: Effective date, if other effective date is listed, the coor 90 days after the date of the date	er than the date of filing:
CLE V: Effective date, if other effective date is listed, the coor 90 days after the date of the date of the EQUIRED SIGNATURE Signature (In accordance with constitutes an affirm I am aware that any	er than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business of filing.)  E:  /s/Jeff Hudlett  of a member or an authorized representative of a member.  section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State
CLE V: Effective date, if other effective date is listed, the coor 90 days after the date of the date of the EQUIRED SIGNATURE Signature (In accordance with constitutes an affirm I am aware that any	er than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business of filing.)  E:  /s/Jeff Hudlett of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true.
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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)

Page 2 of 2