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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: HWRJ LLK 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:	
Hukley W. Rull - Name of Person	
Film (Company)	
7641 Summen Tarugen on	
7641 Summen Tarugen on Address TAllahrassee F1 32311	
City/State and Zip Code  Mcrudd Comchet Net  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Houley Rodd at (850) 545-8060 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	

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 1 - Name: The name of the Limited Liability Co	ompany is:		
HWRJ	LLC		
(Must end with	the words "Limited Liability C	Company, "L.L.C.," or "LLC	D.")
ARTICLE II - Address: The mailing address and street address	ss of the principal office of the	Limited Liability Company	is:
Principal Office Address:	Mailing Addres	<u>:s:</u>	
764150mmen -	NAWAGEN OU	50me	
ARTICLE III - Registered Agent, (The Limited Liability Company can another business entity with an activ	not serve as its own Registered e Florida registration.)	l Agent. You must designate	e an individual or
The name and the Florida street addr	ess of the registered agont are:	KARI WAT	Is ventling Thai
	Name	1261 y	repuling Thai
Florido etro	et address (P.O. Box NOT acc		•
1)		· ·	
	Ahrassee FL City	Zip	
Having been named as registered ag the place designated in this certificapacity. I further agree to comply of my duties, and I am familiar wi	icate, I hereby accept the appoi with the provisions of all statu	intment as registered agent a tes relating to the proper and f my position as registered ag S	nd agree to act in this d complete performance
	(CONTINUED)		2014 365 1ACE
	Page 1 of 2		2014 JAN 24 A
			Signal Si

Title: "AMBR" = Authorized Member "MCR" = Manager	Name and Address:
HMBn	Hunley W, Ruld in 17641 Summan TANAGEN DA TANAMASSEE DI 32312
ective date is listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 days
JE V: Effective date, if other than the date fective date is listed, the date must be spof filing.)	e of filing: (OPTIONAL) Decific and cannot be more than five business days prior to or 90 days
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LE V: Effective date, if other than the date fective date is listed, the date must be spof filling.)	e of filing: (OPTIONAL)  Decific and cannot be more than five business days prior to or 90 days  - What Man Mandal
E V: Effective date, if other than the date fective date is listed, the date must be spot filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE  Signature of a man (In accordance with section constitutes an affirmation of the section of the section constitutes an affirmation of the section of the	ember of an authorized representative of a member.  605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date fective date is listed, the date must be spot filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE  Signature of a me (In accordance with section constitutes an affirmation of I am aware that any false in constitutes a third degree for the section constitutes a third degree of the section constitutes at the section constitutes a third degree of the section constitutes as the section constitutes at the section constitute	ember of an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
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