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T. BROWN

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HHR Realty Holdings LLC
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:
Howard C Smith
Name of Person
Firm/Company
P.O Box 5401
Address
Plant City, FL 33563
City/State and Zip Code
tumblerkidd@msn.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Howard C Smith Jr at 813 777-7885
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \] \$130.00 Filing Fee & \text{Certified Copy} \\ (additional copy is enclosed) \] \$160.00 Filing Fee, \text{Certificate of Status & Certified Copy} \\ (additional copy is enclosed) \] \$160.00 Filing Fee, \text{Certificate of Status & Certified Copy} \\ (additional copy is enclosed) \]
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name	:		<i>></i> _
	ited Liability Company is	is:	
			込まて
HHR Realty Holdings LLC	/h	1 47 1 11 12 12 12 14 17 17 17 17 17 17 17 17 17 17 17 17 17	
	(Must end with the word	ds "Limited Liability Company, "L.L.C.," or "LLC.")	3 3 3 S
ARTICLE II - Addı	ress:		بن کی این
The mailing address	and street address of the	principal office of the Limited Liability Company is:	92
Principal Office Ad	dress:	Mailing Address:	D'
2512 Dell Keen Rd.		P.O. Box 5401	
Plant City, FL 33565		Plant City, Fl 33563	
			_
The name and the Flo	Howard C. Smith Jr		
		Name	
	2512 Dell Keen Rd		
	Florida street address	ss (P.O. Box <u>NOT</u> acceptable)	
	Plant City	FL 33565	
	City	y Zip	
the place designa capacity. I further	ated in this certificate, I he agree to comply with the I am familiar with and ac	to accept service of process for the above stated limited lia sereby accept the appointment as registered agent and agre provisions of all statutes relating to the proper and compleccept the obligations of my position as registered agent as Chapter 605, F.S	e to act in this ete performance
	registered Ag	gent's Signature (REQUIRED)	

(CONTINUED)

Page 1 of 2

<u> </u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
AMBR	Howard C Smth Jr
	2512 Dell Keen rd, Plant City, Fl 33565 P.O. Box 5401, Plant City, Fl 33563
	1.0. 30x 0401, Fallit Gity, 1133333
V: Effective date, if other than the citive date is listed, the date must be	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90
Use attachment if necessary) V: Effective date, if other than the extive date is listed, the date must be filing.) VI: Other provisions, if any.	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90
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