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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FIYIN Hawaijan Landscaping 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:
Gary C Holley Jr Name of Person
Flyin Hawaiian Landscoping LLC Est Firm/Company
89 siera ct Address
Santa Rosa Beach Fl 32459 City/State and Zip Code Chcis Holler 9'70 G mail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Racy Holley Jr at (850) 714 4394 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Flyin Hawaiian La (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office.	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.) The name and the Florida street address of the registered at Gary C. He	egistered Agent. You must designate an individuation gent are:
Name 89 Set Cro Florida street address (P.O. Box Marke) Santa Rosa Voca City	Sierra ct

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, 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	The name and address of each p	rson authorized to manage	and control the Limi	ted Liability Co		
	<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name at	nd Address:	11 11		
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ARTICLE IV-

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