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ACCOUNT NO. : 12000000195		
REFERENCE: 412287 80690A		
AUTHORIZATION: Smellele rate		
COST LIMIT : \$125.00		
ORDER DATE : December 8, 2014		
ORDER TIME : 3:36 PM		
ORDER NO. : 412287-005		
CUSTOMER NO: 80690A		
DOMESTIC FILING		
NAME: HS BENEFIT PLANS, 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: Courtney Williams - EXT. 62935		
EXAMINER'S INITIALS:		

ARTICLES OF ORGANIZATION OF A FLORIDA LIMITED LIABILITY COMPANY

The undersigned, in forming a Florida Limited Liability Company ("Company") under the Florida Revised Limited Liability Company Act, Chapter 605 of the Florida Statutes, hereby adopts the following Articles of Organization for such Company:

ARTICLE I - NAME

The name of this limited liability company is:

HS Benefit Plans, LLC

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ARTICLE II - ADDRESS

The mailing address and the street address of the principal office of the Company is 60 Edgewater Drive, Apt. 17K, Coral Gables, FL 33133.

ARTICLE III - INITIAL REGISTERED AGENT

The name of the initial Registered Agent of the Company is Steven J. Schermer. The street address of the initial Registered Agent Office is 2800 Ponce de Leon Boulevard, Suite 1125, Coral Gables, Florida 33134.

ARTICLE IV - MANAGEMENT

The Company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of the initial manager is:

Title: MGR Stanley I. Shapiro 60 Edgewater Drive, Apt. 17K Coral Gables, FL 33133

ARTICLE V - AMENDMENTS

The power to amend these Articles of Organization is reserved in the Members of the Company and any such amendment requires the unanimous written consent of all of the Members of the Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 2 day of December, 2014.

By:

Steven J. Schermer, Esq., Authorized Representative

(In accordance with Section 605.0203(3), Florida Statutes, the execution of this document 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 Section 817.155, Florida Statutes).

THE ED

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

I hereby accept the appointment as the initial Registered Agent of HS Benefit Plans, LLC, as made in the foregoing Articles of Organization, and agree to act in such 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 the initial Registered Agent of HS Benefit Plans, LLC as provided for in Chapter 605, Florida Statutes.

Date: December \mathcal{S} , 2014

Steven J. Schermer, Initial Registered Agent

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