18132001050 From: John Gurba Page 1 of 2

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : COURT ACCESS CENTERS OF AMERICA

Account Number : 075350000541 Phone : (813)875-1333 Fax Number : (813)200-1050

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Choc899@gmail.com Email Address:

FLORIDA LIMITED LIABILITY CO. C.H.O.C., LLC

| Certificate of Status | 1 |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name and Address

The name of this Limited Liability Company is:

C.H.O.C., LLC

The mailing address and street address of the Limited Liability Company are:

5248 Plymouth St. Jacksonville, FL 32205

ARTICLE II Term of Existence

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

ARTICLE III Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

ARTICLE IV

Powers

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3812 W Linebaugh Ave., Suite 102, Tampa, FL 33618, 813-875-1333.

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SEGNETARY OF STATE
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ARTICLE V Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is:

5248 Plymouth St. Jacksonville, FL 32205

and the name of its registered agent at such address is:

Chadwin Williams

ARTICLE VI Management

The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address

Chadwin Williams, Authorized Member 5248 Plymouth St. Jacksonville, FL 32205

| | Chad Williams |
|------------------------------------|------------------|
| Dated: Wednesday, January 07, 2015 | A2FG188228814CE |
| | Chadwin Williams |

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Audit # H15000004743

ACCEPTANCE BY REGISTERED AGENT

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.

| | Oracl Signed by: | |
|-----------------------|------------------|---------------|
| Date: January 7, 2015 | Chadwin Williams | - |

SEGRETARY OF STATE