

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000043495 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6353

From:

Account Name : THOMAS K. BOARDMAN, P.A.

Account Number : 102350003270 Phone

: (863)674~1027

Fax Number

: (863)674~1029

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

Email Address:

dahouse (a) Me. com

FLORIDA LIMITED LIABILITY CO. HKH LIMITED, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

3 Burch FEB 2 0 2015

Electronic Filing Menu

Corporate Filing Menu

Help

H15000043495 3

ARTICLES OF ORGANIZATION

OF

HKH LIMITED, LLC

The undersigned members desire to form a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

CHARTER	TALL.	귥	440.45
ARTICLE I	AHA V	83.	escription.
NAME	SSEC.	9) }
The name of the limited liability company shall be HKH LIMITED	رغ <u>ہ</u> اند	PH L:	
ARTICLE II	ATF.	90:	آئوسييه (۱

The mailing address of this limited liability company is P.O. Box 014739, Miami, Florida 33126, and the street address of the principal office of this limited liability company shall be 3790 NW 11th Street, Miami, Florida 33126.

ARTICLE III

DURATION

This limited liability company shall exist until January 31, 2045, unless sooner dissolved in a manner provided by law or as provided in the regulations adopted by the members.

THIS DOCUMENT PREPARED BY: Thomas K. Boardman THOMAS K. BOARDMAN, P.A. P.O. Box 2197 LaBelle, Florida 33975 (863) 674-1027 Florida Bar No. 103581

H15000043495 3

ARTICLE IV

MANAGEMENT

This limited liability company shall be managed by one of its members. The name and address of the initial manager/member is as follows:

Dwayne A. House 3790 NW 11th Street Miami, Florida 33126

ARTICLE V

RESTRICTIONS ON MEMBERSHIP

Members shall have the right to admit new members by majority consent or as otherwise provided by the Operating Agreement. Contributions required of new members shall be determined as of the time of admission to the limited liability company.

ARTICLE VI

MEMBERS' RIGHTS TO CONTINUE BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the liability company, the remaining members shall have the right to continue the business upon the majority consent of such remaining members.

Executed by the undersigned at LaBelle, Florida, on February 18, 201:

DWAYNE A. HOUSE

STATE OF FLORIDA COUNTY OF HENDRY

The foregoing instrument was sworn to and acknowledged before me this 18 day of February, 2015, by DWAYNE A. HOUSE, who is personally known to me or Dwho has produced as identification.

KEREMSA M. CLARK
Rotary Public - State of Florida
My Comm. Expires Aug 14, 2016
Commission # EE 195385

NOTARY PUBLIC Name: Kerensa M - Clark

H15000043495 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- The name of the limited liability company is: HKH LIMITED, LLC 1.
- 2. The name and address of the registered agent and office is:

DWAYNE A. HOUSE (Name)

3790 NW 11 STREET (P.O. Box not acceptable)

Miami, Florida 33126 (City/State/Zipcode)

Having been named as registered agent and to accept service of process for the above state corporation 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.

(Signature)