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.

(((H15000070068 3)))



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

:oT

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL IN

Account Number : 110432003053

Phone Fax Number : (561)694-8107 : (561)694-1639

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

2ma	i 1	Address:	

FLORIDA LIMITED LIABILITY CO.

CHM Hoffman Village, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

of 2

3/19/15, 4:39 PM

ARTICLES OF ORGANIZATION OF CHM HOFFMAN VILLAGE, LLC

ARTICLE I - NAME

The name of this limited liability company is CHM HOFFMAN VILLAGE, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The street address of the principal office of the Company is 6312 Kingston Pike, Suite C, Knoxville, TX 37919. The mailing address of the Company is 6312 Kingston Pike, Suite C, Knoxville, TX 37919.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 11380 Prosperity Farms Road, #221E, Palm Beach Gardens, FL 33410. The name of the registered agent at such address is Corporate Creations Network Inc.

ARTICLE IV - MANAGEMENT

The Company is member-managed for purposes of Section 605.0407, Florida Statutes, and other relevant provisions of Chapter 605, Florida Statutes, and the initial member of the Company is CHM, LLC, a Tennessee limited liability company.

Miles E. Cuilom, Jr.,

Authorized Representative of Member

Acceptance of 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 as provided for in Chapter 605, Florida Statutes.

Corporate Creations Network Inc.

Print N

Kristine/Duran, Special Secretary

2015 MAR 19 AM 7: 3 SEGRETARY OF STATE