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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE
TAIL AHASSEE, FLORID

JUN - 1 2015 T. HAMPTON

COVER LETTER

Division of Corporations		
SUBJECT: CHF Irrigation systems and consu- Name of Lin	ulting, L.L.C nited Liability Company	
The enclosed Articles of Organization and fee(s) ar	re submitted for filing.	
Please return all correspondence concerning this me	atter to the following:	
Christopher H French	Name of Person	
CHF Irrigation systems and consult	ting, L.L.C Firm/Company	······································
714 NW 2nd Ave	Address	
Delray Beach, FL 33444	City/State and Zip Code	
chfwshf@gmail.com E-mail address: (to be used	d for future annual report notifica	ation)
For further information concerning this matter, plea	ase call:	
Christopher H French at (5		ephone Number
Enclosed is a check for the following amount:	Section of the sectio	
\$125.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Matter Address	S44/5	

Mailing Address
Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
CHF Irrigation systems and consulting LLC. (Must end with the words "Limited Limited	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:
714 NW 2nd Ave Delray Beach, FL 33444	714 NW 2nd Ave Delray Beach, FL 33444
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered as	gent are:
Christopher H French Name	
714 NW 2nd Ave Florida street address (P.O. Box N	OT acceptable)
Delray Beach	FL 33444
City	Zip
the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblige	ce of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S
(CONTINUEI))

Page 1 of 2

TALLAHASSEE, FLORIBA

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR — Wanager	Christopher H Fench	
	714 NW 2nd Ave	
	Delray Beach, FL 33444	
		<u>_</u>
		
		
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(Use attachment if necessary)		
of filing.) LE VI: Other provisions, if any.	pecific and cannot be more than five business days prior to	
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