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JUN 1 6 2015 J SHIVERS



April 30, 2015

NANA NICOLE HARDING 5262 N ORANGE BLOSSOM TRAIL #208 ORLANDO, FL 32810

SUBJECT: HARDING CAPITAL INVESTMENT LLC

Ref. Number: W15000030672

We have received your document for HARDING CAPITAL INVESTMENT LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

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Letter Number: 915A00008922

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	

HARDING CAPITAL IVESTMENT LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

5262 N ORANGE BLOSSOM TRAIL #208 ORLANDO FLORIDA 32810

5262 N ORANGE BLOSSOM TRAIL 3208 ORLANDO FLORIDA 32810

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

WILLEM HARDING

Name

7008 FOREST CITY RD

Florida street address (P.O. Box NOT acceptable)

ORLANDO

FLORIDA

City

State

Zip

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 l am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Page 1 of 2

(CONTINUED)



Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	MRS NANANICOLE NDOMBE HARDING
MOR	5262 N ORANGE BLOSSOM TRAIL #208
	ORLANDO FLORIDA 32810
MGR	DR WILLEM FRANCOIS HARDING
	5262 N ORANGE BLOSSOM TRAIL #208
	ORLANDO FLORIDA 32810
ffective date is listed, the date muse of filing.)	he date of filing: 06/13/2015
CLE V: Effective date, if other than the other date is listed, the date must be of filing.) If the date inserted in this block does not be one of the date inserted in this block does not be one of the date.	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be
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CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's of the provisions, if any.	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be
CLE V: Effective date, if other than the frective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be rement of State's records.
CLE V: Effective date, if other than to a ffective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's continuous of the continuous of t	es not meet the applicable statutory filing requirements, this date will not be rement of State's records.
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\$ 5.00 Certificate of Status (Optional)