

**Florida Department of State**  
**Division of Corporations**  
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**FLORIDA LIMITED LIABILITY CO.**  
**HINTER FFHG INVESTMENTS, LLC**

Certificate of Status	0
Certified Copy	1
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September 17, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
E-FILE, EXPRESS CORPORATE FILING

SUBJECT: HINTER FFHG INVESTMENTS, LLC  
REF: W15000061554

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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Sylvia Gilbert  
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FAX Aud. #: H15000222960  
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Hinter FFHG Investments, 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:2030 S. Douglas Road  
Suite 212  
Coral Gables, Florida 331342030 S. Douglas Road  
Suite 212  
Coral Gables, Florida 33134

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

Sandra Ciola  
Name2030 S Douglas Road, Suite 212  
Florida street address (P.O. Box NOT acceptable)Coral Gables FL 33134  
City 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 I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Hector A. Fargo

2030 S. Douglas Road #212

Coral Gables, FL 33134

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

(In accordance with section 605.020 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Hector A. Fargo

Typed or printed name of signer

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