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SECRETARY OF STATE ONE DIVISION OF CORPORATIONS

2 09/22/15

COVER LETTER

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TO: Registration S Division of Co			
SUBJECT: 85	O Cortage P	Pental S	
		mited Liability Company	
The enclosed Articles o	f Organization and fee(s) a	re submitted for filing.	
Please return all corresp	oondence concerning this m	natter to the following:	
	Byn	Phousol	
	1,45	Name of Person	
	Hente	age Bulders INC.	
		Firm/Company	
	107-AM		
		Address	
	Ponoma	City Beach, FL 324 City/State and Zip Code	13
		age builders @ gmail	
For further information c	oncerning this matter, pleas	d for future annual report notifications	on)
Tot ration information of	· · · ·	- Can	
	he of Person A	Area Code Daytime Telephone	
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
New Divis P.O. 1	ng Address Filing Section ion of Corporations Box 6327 hassec, FL 32314	Street Address New Filing Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	· Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Mailing Address:

107 Amor Place, Sute 105 Ponema City Bosch, FL 32413

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

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

Principal Office Address:

07 Amor Place, Suite 105 Poromo Chy Book, FL 32413

another business entity with an active Florida registration.)

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

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

Ryon Phreisel		
107 Amor Dlace. Sute 105		
Florida street address (P.O. Box NOT acceptable)		
Poroma City Beach FL 32413		
City State Zip		
Having been named as registered agent and to accept service of process for the above stated limited liability company of place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties 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)	y. <i>I</i>	
(CONTINUED)		
Page 1 of 2	15 SEP 14	SECRETARY I
	2	구구 으

The name and address of each person	authorized to manage and control the Limited Liability Company:
Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	2
AMBR	Syon Phose
	Homa CHy Beach FL 32406
AMBR	John Pfnoisel
	717 Guifiran Dr. Ponoma City Brock FL 32413
	Panana City Brach FC 32413
(Use attachment if necessary)	
(If an effective date is listed, the date must be the date of filing.) Note: If the date inserted in this block does not	ate of filing: OR OI AOIS (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed a
the document's effective date on the Departme	ent of State's records.
ARTICLE VI: Other provisions, if any.	
REOUIRED SIGNATURE:	Z. A.D
Signature of a	member or a authorized representative of a member.
	cuted in accordance with section 605.0203 (1) (b), Florida Statutes. Also information submitted in a document to the Department of State

Filing Fees:

Typed or printed name of signce

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 5.00 Certificate of Status (Optional)

ARTICLÉ IV-

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