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## **COVER LETTER**

то:	Registration Section Division of Corporations
CUDII	SMITH HOLDINGS AND ENTRPRISES LTD.
SUBJI	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	LONNY CJ SMITH
	Name of Person
	EZ OFFICE 123.COM
	Firm/Company
	120 BARBADOS DRIVE
	Address
	TORONTO , ONTARIO M1J 1L2
	City/State and Zip Code CJ@EZOFFICE123,COM
	E-mail address: (to be used for future annual report notification)
or furth	er information concerning this matter, please call:
	LONNY SMITH 514 815-5482
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
]\$125.0	O Filing Fee \$\ \text{Certificate of Status} \ \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certified of Status & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Certified Copy (
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		IGS AND ENTRERPE			_	
(Must en	d with the words "Limite	d Liability Company, "I	L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street	address of the principal	office of the Limited Liz	ability Company is:			
Princ	ipal Office Address:		Mailing Ado	dress:		
13121 SW 30TH		SAME			_	
MIRAMAR FL 33	027				•	
(The Limited Liability Compa another business entity with a The name and the Florida street	n active Florida registration active Florida registere address of the registere	on.) d agent are:  DAVID SCOTT  Name  REET		SECRETARY OF S	16 FEB 23 PM	
		ss (P.O. Box NOT acce	•	OR1	t: 50	
	MIRAMAR City	FLORIDA State	33027 Zip	D.11	O	
	•		·	bility company at	t the	

Page 1 of 2

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AK		v.i.	, F.	1 7	-

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

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	LONNY CJ SMITH	_
MGR	STEVE ANTHONY SMITH	 ਨ
AMBR	DAVID SCOTT  13121 SW 30 STREET  MIRAMAR FL. 33027  FLORITE  DAVID SCOTT  STATE  OF ST	B 23 PH 4: 50
(If an effective date is listed, the date must be speci the date of filing.)	filing:	
the document's effective date on the Department of ARTICLE VI: Other provisions, if any.		not be noted a
This document is executed I am aware that any false in	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statute formation submitted in a document to the Department of Statut	es.
DAVID SCOTT	Plony as provided for in s.817.155, F.S.  Typed or printed name of signee	

as

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)