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05/17/16

COVER LETTER

TO:	Registration Section Division of Corporations			
CHDIE	Bossman Asset Mgmt LLC			
Name of Limited Liability Company				
The end	closed Articles of Organization and fee(s) are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	Karen Bossman			
	Name of Person			
	Bossman Asset Mgmt			
	Firm/Company			
	12472 Lake Underhill Road #496			
	Address			
	Orlando, Florida 32828			
	City/State and Zip Code			
	KBossman@bossmanassetmgmt.com E-mail address: (to be used for future annual report notification)			
For furth	er information concerning this matter, please call:			
	Karen Bossman 407 382-9166			
	Name of Person Area Code Daytime Telephone Number			
Enclose	ed is a check for the following amount:			
	Filing Fee \$\ \text{Certificate of Status} \] \$155.00 Filing Fee & \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \] \$160.00 Filing Fee, \text{Certified of Status & Certified Copy} \text{(additional copy is enclosed)}			

Mailing Address

Ž.

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing 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:					
Bossman Asset Mgmt LLC					
(Must end with the words "Limited Liability C	ompany, "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:				
12472 Lake Underhill Road #496	12472 Lake Underhill Road #496				
Orlando, FL 32828	Orlando, FL 32828				
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:					
Karen Bossman					
Name					
12014 Builfrog Court					
Florida street address (P.O. Box	NOT acceptable)				

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..

State

Orlando

City

(CONTINUED)

Page 1 of 2

	Title: "AMBR" = Authorized	Member	Name and Address:
	"MGR" = Manager		
	MGR		Karen Bossman
			12014 Bullfrog Court
			Orlando, FL 32828
	MGR		Timothy Bossman
	· · · · · · · · · · · · · · · · · · ·	•	13408 Fladgate Mark Drive
			Riverview, FL 33579
		•	
If an ef he date <u>Note:</u>	Mective date is listed, the of filing.) If the date inserted in this	date must be specific an	control (OPTIONAL) and cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as seconds.
ARTIC	LE VI: Other provisions,	if any.	
	REOUIRED SIGNAT		ar
	S This do I am av	ignature of a member of cument is executed in ac vare that any false informa	r an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.
		Karen Bossman	

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

ARTICLE IV-

Page 2 of 2

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)

Typed or printed name of signee