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SECPETARY OF STATE TALL / 1285 S. CORIDA

MJM

COVER LETTER

	Registration Section Division of Corporations				
SUBJEC		aHink			
SUBJEC	Nan	ne of Limited Liab	oility Company		
The enclo	osed Articles of Organization and	fee(s) are submitte	ed for filing.		
Please ret	turn all correspondence concerning	g this matter to the	e following:		
	Jeffrey Henry				
		Name	of Person	<u> </u>	
	HenraHink LLC				
		Firm/C	Company	16 H	SEC
	1317 North Halifax Avenue			May 2	語景
		Ad	dress		77
	Daytona Beach, Florida 32118			Pπ	S. S.
•	jhenry0704@hotmail.com	City/State	and Zip Code	21 21	P.
	E-mail address: (to	be used for future	e annual report notification)		
For further	information concerning this matte	er, please call:			
	Jeffrey Henry	386 at (212-1820		
	Name of Person	Area Code	Daytime Telephone Number		
Enclosed	is a check for the following amou	nt:			
\$125.00 I	Filing Fee \$130.00 Filing F Certificate of St	atus	fied Copy sonal copy is enclosed) \$160.00 Filing Fee & S160.00 Filing Certificate of Certified Contact (additional copy)	f Status & py	
	Mailing Address 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

HenraHink, LLC			·	
	with the words "Limited	Liability Company	v. "L.L.C" or "LLC.")	
(**************************************			,, =.=.=.,	
RTICLE II - Address:				
e mailing address and street ad	ldress of the principal of	ffice of the Limited	Liability Company is:	
Princips	al Office Address:		Mailing Address:	
1360 Ocean Shore Bl	vd Suite A	131	7 North Halifax Ave	
Ormond Beach, FL 3.			tona Beach, FL 32118	
RTICLE III - Registered Age	nt, Registered Office,	& Registered Age	nt's Signature:	
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	cannot serve as its own	Registered Agent.	nt's Signature: You must designate an individual or	C)
he Limited Liability Company	cannot serve as its own ctive Florida registratio	Registered Agent. n.)		6 Mily 2
The Limited Liability Company nother business entity with an a	cannot serve as its own ctive Florida registratio	Registered Agent. n.)		6 MAY 20
The Limited Liability Company nother business entity with an a	cannot serve as its own ctive Florida registration address of the registered	Registered Agent. n.)		6 MAY 20 PH
The Limited Liability Company nother business entity with an a	cannot serve as its own ctive Florida registration address of the registered	Registered Agent. n.) agent are: Name		6 MAY 20 PH 3:
The Limited Liability Company nother business entity with an a	cannot serve as its own ctive Florida registrationddress of the registered Jeffrey Henry	Registered Agent. n.) agent are: Name	You must designate an individual or	6 MAY 20 PH
the Limited Liability Company nother business entity with an a	cannot serve as its own ctive Florida registration address of the registered Jeffrey Henry 1317 North Halifax A	Registered Agent. n.) agent are: Name	You must designate an individual or	6 MAY 20 PH 3:

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)

Page 1 of 2

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Jeffrey Henry
	1317 North Halifax Ave
	Daytona Beach, FL 32118
(Use attachment if necessary)	
IFV: Effective data if other than the data of t	Glino: (ODTIONAL)
ffective date is listed, the date must be specifi	filing: (OPTIONAL) ic and cannot be more than five business days prior to or 90 days a
of filing.)	
if the date inserted in this block does not meet ument's effective date on the Department of S	the applicable statutory filing requirements, this date will not be list
•	nace & records.
LE VI: Other provisions, if any.	

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Typed or printed name of signce

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)

Page 2 of 2