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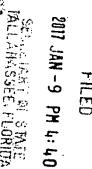
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COVER LETTER

SEH WORLDWIDE, LLC Name of Li	imited Liability Company
Name of Li	imited Liability Company
	, , ,
Articles of Organization and fee(s) a	are submitted for filing.
Il correspondence concerning this n	natter to the following:
JZANNE HART	
	Name of Person
	Firm (Company)
EST DODI AD CENT	Firm/Company
553 POPLAR ST NE	Addings
	Address
PETERSBURG, FL 33716	
	City/State and Zip Code
	ed for future annual report notification)
rmation concerning this matter, plea	se call:
	813 503-8548
	Area Code Daytime Telephone Number
check for the following amount:	
g Fee \$\int \frac{\$130.00 \text{ Filing Fee & Certificate of Status}}{\text{Certificate of Status}}	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
	E-mail address: (to be use mation concerning this matter, please ZANNE HART at (Name of Person Check for the following amount: g Fee \$130.00 Filing Fee & Certificate of Status

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMP. **ARTICLE I - Name:** 2017 JAN -9 PM 4: 41 The name of the Limited Liability Company is: SEH WORLDWIDE, LLC (Must end with the words "Limited Liability Company, "L.L.C." or **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address: Mailing Address:** 10553 POPLAR ST NE 10553 POPLAR ST NE ST PETERSBURG, FL 33716 ST PETERSBURG, FL 33716 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: **SUZANNE HART** Name 10553 POPLAR ST NE

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..

Florida street address (P.O. Box NOT acceptable)

State

ST PETERSBURG
City

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authoriz	zed Member
"MGR" = Manager	OLUMAN MARIA DO
AMBR	SUZANNE HART
	10553 POPLAR ST NE
	ST PETERSBURG, FL 33716
	
	
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ARTICLE IV-