

L170000048147

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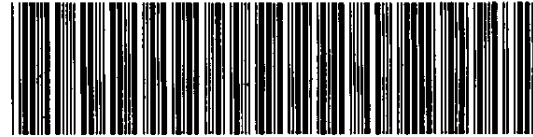
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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01/23/17--01043--017 \*\*125.00

FILED  
17 JAN 23 AM 5:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

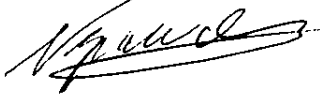
01/17/17

**SUBJECT: BLUE HORIZON HOLDING GROUP, LLC**

ENCLOSED PLEASE FIND TWO COPIES OF OUR ARTICLES OF ORGANIZATION AS WELL AS OUR  
CHECK IN THE AMOUNT OF \$125.00

SHOULD YOU HAVE ANY QUESTIONS PLEASE CONTACT ME @ 203-550-5425

SINCERELY

A handwritten signature in black ink, appearing to read 'Nazim Ali', with a horizontal line drawn through the middle of the signature.

NAZIM ALI  
1087 HIDDEN HARBOR LANE  
KISSIMMEE FLORIDA 34746

**ARTICLES OF ORGANIZATION**  
**OF**  
**BLUE HORIZON HOLDING GROUP, LLC**  
**A FLORIDA LIMITED LIABILITY COMPANY**

THE UNDERSIGNED ACTING AS THE ORGANIZER OF **BLUE HORIZON HOLDING GROUP, LLC** UNDER THE FLORIDA LIMITED LIABILITY ACT, CHAPTER 605 FLA. STAT. ADOPTS THE FOLLOWING ARTICLES OF ORGANIZATION

**ARTICLE I**

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

**BLUE HORIZON HOLDING GROUP, LLC**

**FILED**  
**17 JAN 23 AM 5:26**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**ARTICLE II**

THE STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

**1087 HIDDEN HARBOR LANE**  
**KISSIMMEE FLORIDA 34746**

THE MAILING ADDRESS OF THE LIMITED LIABILITY COMPANY IS:

**1087 HIDDEN HARBOR LANE**  
**KISSIMMEE FLORIDA 34746**

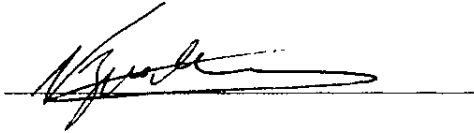
### ARTICLE III

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:

NAZIM ALI  
1087 HIDDEN HARBOR LANE  
KISSIMMEE FLORIDA 34746

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.

REGISTERED AGENT SIGNATURE:



### ARTICLE IV PURPOSE AND POWERS

A. PURPOSES THE COMPANY IS ORGANIZED FOR ANY LEGAL AND LAWFUL PURPOSE FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED PURSUANT TO CHAPTER 605 FLA. STAT AND THE SAME MAY BE AMENDED FROM TIME TO TIME.

B. POWERS THE COMPANY SHALL HAVE AND MAY EXERCISE ALL POWERS AND RIGHTS WHICH A LIMITED LIABILITY COMPANY MAY EXERCISE PURSUANT TO CHAPTER 608, FLA STAT. AND THE SAME MAY BE AMENDED FROM TIME TO TIME.

### ARTICLE V AMENDMENTS

THE COMPANY RESERVES THE RIGHT TO AMEND ANY PROVISION OF THESE ARTICLES OF ORGANIZATION, WHICH AMENDMENT SHALL ONLY BE EFFECTUATED BY THE APPROVAL OF THE MEMBERS OF THE COMPANY.

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**ARTICLE VI**  
**MANAGEMENT**

THE COMPANY SHALL BE MANAGED BY ONE OR MORE MANAGERS AS PROVIDED IN THE COMPANY'S OPERATING AGREEMENT. NAZIM ALI SHALL BE THE INITIAL MANAGER OF THE COMPANY.

**ARTICLE VII**  
**ADMISSION OF ADDITIONAL MEMBERS**

THE COMPANY SHALL ADMIT NEW MEMBERS AS PROVIDED IN THE OPERATING AGREEMENT OF THE COMPANY.

**ARTICLE VIII**  
**DURATION**

**THE COMPANY SHALL** EXIST PERPETUALLY AFTER FORMATION UNLESS DISSOLVED ACCORDING TO LAW OR THE COMPANY OPERATING AGREEMENT.

**ARTICLE IX**

**THE NAME AND ADDRESS OF PERSON(S) AUTHORIZED TO MANAGE LLC:**

TITLE: MGR NAZIM ALI  
1087 HIDDEN HARBOR LANE  
KISSIMMEE FLORIDA 34746

SIGNATURE OF MEMBER OR AN AUTHORIZED REPRESENTATIVE

Signature: \_\_\_\_\_



I AM THE MEMBER OR AUTHORIZED REPRESENTATIVE  
SUBMITTING THESE ARTICLES OF ORGANIZATION AND AFFIRM THAT THE FACTS  
STATED HEREIN ARE TRUE. I AM AWARE THAT 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. I UNDERSTAND THE REQUIREMENT TO  
FILE AN ANNUAL REPORT BETWEEN JANUARY 1ST AND MAY 1ST IN THE CALENDAR  
YEAR FOLLOWING FORMATION OF THE LLC AND EVERY YEAR THEREAFTER TO  
MAINTAIN "ACTIVE" STATUS