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Special Instructions to	Filing Officer:	





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SECRETARY OF THE STATE OF THE SECRETARY OF THE SECRETARY

## COVER LETTER

	New Filing Section Division of Corporations				
ettn 197	Chen Assets, LLC				
SUBJEC	Name o	Limited Liability Company			
The encl	used Articles of Organization and fee(	s) are submitted for filing.			
Please re	turn all correspondence concerning th	s matter to the following:			
	Peter Chen				
		Name of Person			
		Firm/Company			
	200.77	FirmCompany			
	209 Timacuan Oaks Court			2	
	Lake Mary, FL 32746	Address		2017 AUG	
	pcendo32746@gmail.com	City/State and Zip Code		52	•
	E-mail address: (to be	used for future annual report notification)	0	PK 3:	
or furthe	r information concerning this matter, p	lease call:	17 2		
	Whitney Thorne	801 494-8494 1 ( )			
	Name of Person	Area Code Daytime Telephone Number			
Epclosed	I is a check for the following amount:				
	Filing Fee S130.00 Filing Fee Certificate of Statu	Certifical Copy Certifical Copy (additional copy is enclosed) Certifical Copy	Filing Fee, cate of Status & d Copy is enclose	:d)	
	Mailing Address New Filing Section	Street Address New Filing Section			
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

y Company, "L.L.C.," or "LLC.")  The Limited Liability Company is:  Mailing Address:
Mailing Address:
<u></u>
209 Timacuan Oaks Court
Lake Mary, FL 32746
istered Agent's Signature:
ered Agent. You must designate an individual o

 Peter Chen

 Name

 209 Timacuan Oaks Court

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

 Lake Mary
 FL
 32746

 City
 State
 Zip

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)

(CONTINUED)

	<u>itle:</u>		Name and Address:	
	AMBR" = Authorized MGR" = Manager	Member		
	4GR		Peter Chen	
_			209 Timacuan Oaks Court	
			Lake Mary, FL 32746	
_				
_				
	Jse attachment if neces V: Effective date, if o	·	. (OPTIONAL)	
RTICLE f an effec e date of lote: If the	V: Effective date, if o tive date is listed, the filing.) ne date inserted in this	ther than the date of filing: date must be specific and	. (OPTIONAL)  I cannot be more than five business days prior to or 90 d  pplicable statutory filing requirements, this date will not b secords.	
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RTICLE f an effec e date of tote: If the docume	V: Effective date, if o tive date is listed, the filing.) ne date inserted in this ent's effective date on VI: Other provisions, i	ther than the date of filing: date must be specific and block does not meet the a the Department of State's fany.  URE: gnature of a member or cument is executed in acc are that any false informat tes a third degree felony a	pplicable statutory filing requirements, this date will not be records.  an authorized representative of a member, ordance with section 605.0203 (1) (b), Florida Statutes, tion submitted in a document to the Department of State	

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)