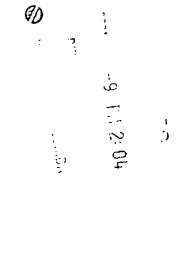
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TICLE II - Address:			
·	, ,	office of the Limited Liability Company is:	
<u>P</u>	rincipal Office Address:	Mailing Address:	
712 Ponca Tra		712 Ponca Trail	
Maitland, Flor	ida 32751	Maitland, Florida 32751	
ELimited Liability Co her business entity w			lual or
the Limited Liability Co other business entity w	mpany cannot serve as its own ith an active Florida registratio	n Registered Agent. You must designate an individion.) d agent are:	:
he Limited Liability Co other business entity w	mpany cannot serve as its own ith an active Florida registratio street address of the registered Charles M. Hollis, III	n Registered Agent. You must designate an individ on.) d agent are:	:
he Limited Liability Co other business entity w	mpany cannot serve as its own ith an active Florida registratio street address of the registered Charles M. Hollis, HI 712 Ponca Trail	n Registered Agent. You must designate an individ on.) d agent are:	:
he Limited Liability Co other business entity w	mpany cannot serve as its own ith an active Florida registratio street address of the registered Charles M. Hollis, HI 712 Ponca Trail	n Registered Agent. You must designate an individion.) d agent are: Name	:

(CONTINUED)

Title: "AMBR" = Authorized "MGR" = Manager	I Member	Name and Address:
MGR — Manager	_	HFT. LLC 712 Ponca Trail Maitland. Florida 32751
	_	
		
		
(Use attachment if nec	essary)	
effective date is listed, the e of filing.)	e date must be sp s block does not r	e of filing:
CLE VI: Other provisions	• 6	

Signature of a member 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.

Charles Hollis, MGR of HFT, LLC, MGR of 10 West Apartments, LLC
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

REOUIRED SIGNATURE:

\$ 5.00 Certificate of Status (Optional)