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COVER LETTER

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| SUBJECT. | | vestment LLC | | | |
| SUBJECT: | | Name of Lin | nited Liability | Company | |
| The enclose | d Articles of (| Organization and fee(s) ar | e submitted fo | or filing. | |
| Please return | n all correspo | ndence concerning this m | atter to the fo | llowing: | |
| | SHEENA SU | JLLIVAN | | | |
| • | | | Name of F | 'erson | |
| | DP SULLIV | AN LAW FIRM | | | |
| | | | Firm/Con | npany | |
| | 851 NE 1ST | AVE #1903 | | | |
| | | | Addre | SS | |
| | MIAMI, FL | 33132 | | | |
| : | SHEENA@D | PSULLIVANLAW.COM | City/State and | Zip Code | |
| _ | | E-mail address: (to be use | | nnual report notification | on) |
| For further in | formation co | oncerning this matter, plea | ise call: | | |
| | SHEENA SU | JLLIVAN at (| 718 | 578-2229 | |
| , | Nam | | Area Code | Daytime Telephone | e Number |
| Enclosed is | a check for t | the following amount: | | | |
| ■\$125.00 | Filing Fœ | □\$130.00 Filing Fee Certificate of Status | Certifi | 5.00 Filing Fee & ied Copy is enclosed) | ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | · · · · · · · · · · · · · · · · · · · | ng Address | | Street Address | |
| | | Filing Section | | New Filing Section D | |
| | | ion of Corporations | | The Centre of Tallah | |
| | | Box 6327 | | 2415 N. Monroe Stre Tallahassee, FL 3239 | |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2521 JUL 20 PH 3: 32

SECRETARY OF STATE

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

| Woodson | investment | LLC |
|---|--------------|-----|
| *************************************** | 70. Constant | |

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

| Principal Office Address: | Mailing Address: |
|---------------------------|---------------------------|
| 16 TILFORD, #A | 16 TILFORD, #A |
| DEERFIELD BEACH, FL 33442 | DEERFIELD BEACH, FL 33442 |

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

| Sheena Sullivan | | |
|-----------------------|---------------------------|------------|
| | Name | |
| 851 NE 1st Ave, #1 | 903 | |
| Florida street addres | ss (P.O. Box <u>NOT</u> a | cceptable) |
| Miami | FL | 33132 |
| 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..

(CONTINUED)

| Title: | Name and Address: |
|--|---|
| "AMBR" = Authorized Member | |
| "MGR" = Manager | |
| AMBR | CHARLES WOODSON |
| | 16 TILFORD, #A DEERFIELD BEACH, FL 33442 |
| | DELICE DELICITY - 15 1 1 1 |
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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)