Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400

Phone : (516)935-3940 Fax Number : (516)935-3088

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please **

Email Address: SHERLYNCLARKS@GMAIL.COM

FLORIDA LIMITED LIABILITY CO.

Clark & Clark Property Investment, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
	perty Investment, LLC
(Must end with the words "L	Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
31037 Harper Branch Place Wesley Chapel, FL 33543	31037 Harper Branch Place Wesley Chapel, FL 33543
another business entity with an active Florida reg	its own Registered Agent. You must designate an individual or gistration.)
The name and the Florida street address of the reg	gistered agent are:
Sherlyn Clark	
	Name
31037 Harper Bran Florida street address (P.	nch Place O. Box <u>NOT</u> acceptable)
Wesley Chapel	FL 33543
City	Zip
the place designated in this certificate, I hereb capacity. I further agree to comply with the pro	ccept service of process for the above stated limited liability company at accept the appointment as registered agent and agree to act in this ovisions of all statutes relating to the proper and complete performance at the obligations of my position as registered agent as provided for in Chapter 605, F.S.
Registered Agent	, (1)
	erlyn Clark
(COI	NTINUED)
P	rage Lof2

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Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager AMBR	Trent Clark	
	31037 Harper Branch Place	_
	Wesley Chapel, FL 33543	_
AMBR	Sherlyn Clark	
	31037 Harper Branch Place	_
	Wesley Chapel, FL 33543	
		_
		_
		_
	ate of filing:	
LE V: Effective date, if other than the da	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to o	 • 90 da
EV: Effective date, if other than the date fective date is listed, the date must be of filling.)		90 da
EV: Effective date, if other than the date fective date is listed, the date must be of filling.) LE VI: Other provisions, if any.	specific and cannot be more than five business days prior to o	90 da
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