

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

Certificate of Organization Domestic LLC

ORGANIZATIONAL ID# DL047402

I, **Shantel Krebs**, Secretary of State of the State of South Dakota, hereby certify that the Articles of Organization of

FH Colonial Huron, LLC

duly signed and verified, have been received in this office and are found to conform to law.

ACCORDINGLY, and by virtue of the authority vested in me by law, I hereby issue this Certificate of Organization and attach hereto a duplicate of the Articles of Organization.

IN TESTIMONY WHEREOF,
I have hereunto set my hand and
affixed the Great Seal of the
State of South Dakota, at Pierre,
the Capital, this 03/07/2016.



Shantel Krebs

Shantel Krebs
Secretary of State

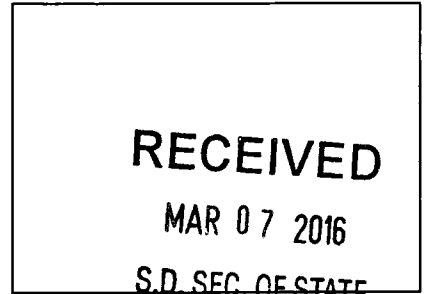
3/7/2016 11:02:05 AM
Change ID: 1319812

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ARTICLES OF ORGANIZATION DOMESTIC LIMITED LIABILITY COMPANY

Please Type or Print Clearly in Ink

Please submit one **Original** and one **Photocopy**
FILING FEE: \$150 payable to SECRETARY OF STATE



Telephone # (972) 331-9660
FAX # (619) 752-1700

Filed this 7 day of
March 2016

SECRETARY OF STATE

Article I

The name of the company is FH Colonial Huron, LLC

The name must contain limited liability company, limited company or the abbreviation L.L.C., LLC, L.C. or LC. Limited may be abbreviated as Ltd. and company may be abbreviated as Co.

Article II

The duration of the company if other than perpetual is _____

Article III

The address of the initial designated office in or out of the State of South Dakota where the company conducts its business.

<u>10th & Lincoln SW</u>	<u>Huron</u>	<input checked="" type="checkbox"/>	<u>SD</u>	<input checked="" type="checkbox"/>	<u>57350</u>
Street Address	City		State		ZIP+4
<hr/>					
<u>Mailing Address (Optional)</u>	<u>City</u>		<u>State</u>		<u>ZIP+4</u>

Article IV

The South Dakota Registered Agent name Northwest Registered Agent, LLC #CR000018

<u>400 N Main Ave., STE 206</u>	<u>Sioux Falls</u>	<input checked="" type="checkbox"/>	<u>SD</u>	<input checked="" type="checkbox"/>	<u>57104</u>
Street Address or Rural Route Number in This State and	City		State		ZIP+4
<hr/>					
<u>Mailing Address in This State, if Different from Street Address</u>	<u>City</u>		<u>State</u>		<u>ZIP+4</u>

When listing a Commercial Registered Agent, please state their CRA #.
This number can be obtained from the Commercial Registered Agent.

CR000018

Article V

The name and address of each organizer

Simmie Cooper	9400 N Central Expy., suite 475	Dallas	<input type="checkbox"/> TX	<input type="checkbox"/> 75231
Name	Street Address	City	State	ZIP+4
Name	Street Address	City	State	ZIP+4
Name	Street Address	City	State	ZIP+4
Name	Street Address	City	State	ZIP+4

Article VI

Check one:

- The company will be member managed.
 The company will be manager managed.

If this company is to be manager managed, please state the name and address of each initial manager.

Simmie Cooper	9400 N Central Expy., suite 475	Dallas	<input type="checkbox"/> TX	<input type="checkbox"/> 75231
Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4
Manager	Street Address	City	State	ZIP+4

Article VII

Whether one or more of the members of the company are to be liable for its debts and obligations as set forth under SDCL 47-34A-303 (c).

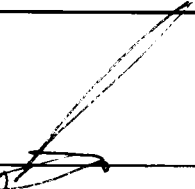
Article VIII

Any other provisions not inconsistent with law, which the members elect to set out in the articles of organization.

The Articles of Organization must be executed by the organizers.

Dated 3/3/12

By signing this form, you agree to have both the fee and the form processed electronically. A fee of up to \$40 will be assessed for returned payments.



(Signature of an organizer)
SIMMIE COOPER

(Printed Name)
MEMBER

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)

Dated _____

(Signature of an organizer)

(Printed Name)

(Title)



South Dakota Secretary of State
SHANTEL KREBS

Return To: FAIR HOUSING PARTNERS LLC
9400 N CENTRAL EXPY STE 475
DALLAS , TX 75231-5027

From: Secretary of State Shantel Krebs
Corporations Division

Filing Date: 03/07/2016

Re: FH Colonial Huron, LLC (DL047402)
Articles of Organization

The documents on behalf of FH Colonial Huron, LLC have been received and filed. Attached is the Certificate along with a receipt for the filing fee of \$150.00. Below is a summary of the transaction.

Remitter	Address	Amount Paid
FAIR HOUSING PARTNERS LLC	9400 N CENTRAL EXPY STE 475 DALLAS , TX 75231-5027	\$150.00
Total:		\$150.00

Description	Invoice Date	Qty	Receipt #	Subtotal
Articles of Organization	03/07/2016	1	390910	\$150.00
Total:				\$150.00