SOSID: 1469295 Date Filed: 9/11/2015 1:47:00 PM Elaine F. Marshall North Carolina Secretary of State C2015 252 00775

State of North Carolina Department of the Secretary of State

Limited Liability Company ARTICLES OF ORGANIZATION

Pursuant to §57D-2-20 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Organization for the purpose of forming a limited liability company.

The name	of the limited liability company is: Closing Tree LLC
	(See Item 1 of the Instructions for appropriate entity designation)
	and address of each person executing these articles of organization is as follows: (State
whether ea	ach person is executing these articles of organization in the capacity of a member, organizer
orboun.r	Note: This document must be signed by all persons listed.)
Thaw	- Sourson, organizer and member - 1974 Turnel Rd #241
	Asheville Nr 7.8845
Sames	Gallagher, organizer and member 22 Arborvale Rd
	Asheville, NC 288\$1
The name	of the initial registered agent is: Shawn Johnson
he street	address and county of the initial registered agent office of the limited liability company is:
LV 1	nd Street 1970 Tune Rd #241
Number a	nd Street 1414 1 MARY 164 FETT
City <u></u> As	he ville State: NC Zip Code: 2888 County: Burcombe
The maili	ng address, if different from the street address, of the initial registered agent office is:
Number a	nd Street
City	State: NC Zip Code: County:
Principal of	office information: (Select either a or b.)
-1	
a. XX The	limited liability company has a principal office.
eren	ipal office telephone number: 828 515 1526
i ne pruie	ipai otike telephose numoer.
The street	address and county of the principal office of the limited liability company is:
Number at	nd Street ZG Uncle Or.
City As	heville State: NC Zip Code: 288\$6 County: Burcarber
	Name of the state

the mailing address, if different from the street	address, of the principal office of the company in
Number and Street 1070 Tune	RJ #24)
city Asheville see: MC	Lip Code: 78845 County: Ourcant
b. The limited liability company does not ha	
	ompany elects to include (e.g., the purpose of the e
(Optional): Please provide a business e-mail add The Secretary of State's Office will e-mail the l	usiness automatically at the address provided above ided will not be viewable on the website. For more
These articles will be effective upon filing, unless	s a future date is specified:
the 9th day of Soplember , 20 15	
	AT.A
	Signature
	SHAWN THOMAS JOHNSON
	Type or Print Name and Title
ow space to be used, if more than one organizer or	member is listed in Item #2 above:
Signature	Signatus
Type and Print Name and Title	Type and Print Name and Title
Type and I have been seen	4.
Signature	Signature
Type and Print Name and Title	Type and Print Name and Title
ne.	*
S: Filing fee is \$125. This document must be file	i with the Secretary of State.

(Fame 1-19)

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