

L02000033784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

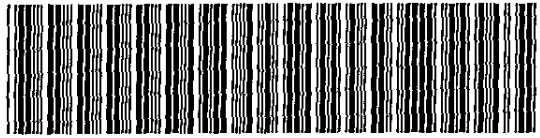
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name	
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Document	
Examiner	
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W. P. Verifier	DCC



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12/16/02--01026--005 **125.00

FILED
02 DEC 16 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO:
Division of Corporations.

Enclosed you will find our submission of "ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY" and a check for filling fees.

Thank you,

Shawn & Heide Hurd
5920 SW 37th AVE
Ft. Lauderdale Fl. 33312
Phone # 954-963-8525
Fax # 954-963-8525

02 DEC 16 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: *Hurddogs L.L.C*

ARTICLE II - Address:

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

5920 SW 37th Ave Ft. Lauderdale FL 33312

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

International Business Incorporators, Inc.

Name

8108 SW 103 Avenue

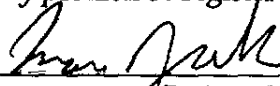
Florida street address (P.O. Box **NOT** acceptable)

Miami

FL 33173

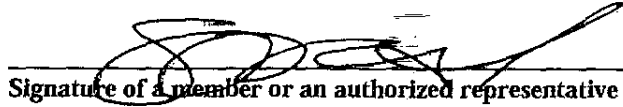
City, State, and Zip

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 608 F.S.



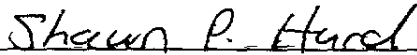
Registered Agent's Signature
Marie Jorczak, Secretary

(An additional article must be added if an effective date is requested)



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

02
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JUN 10 2000