

L04000035301

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

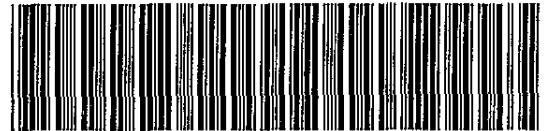
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2004 APR 30 AM 8:50  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAY 11 2004

Kenn J. Bonde  
7952 63<sup>rd</sup> Way N.  
Pinellas Park, FL 33781  
727-455-0635

Registration Section  
Division of Corporations  
P.O.Box 6327  
Tallahassee, FL 32314

Subject: Hoover International Trust Enterprises, LLC

Enclosed check is filing fees for Articles of Organization, Designation of Registered Agent, and Certificate of Status.

Should you have any questions, please feel free to call me at 727-455-0635. Thank you.

Kenn J. Bonde

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TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HOOVER INTERNATIONAL TRUST ENTERPRISES, LLC  
(Name of Limited Liability Company)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KENN JUAN BONDE  
(Name of Person)

HOOVER INTERNATIONAL TRUST ENTERPRISES, LLC  
(Firm/Company)

7952 63rd WAY N.  
(Address)

PINELLAS PARK, FL 33781  
(City/State and Zip Code)

For further information concerning this matter, please call:

KENN JUAN BONDE at (727) 455-0635  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



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TALLAHASSEE, FLORIDA

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

KENN JUAN BONDE  
7952 63rd WAY N.  
PINELLAS PARK, FL 33781

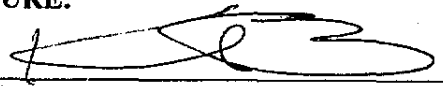
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(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



*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.)

KENN JUAN BONDE  
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)