

LO80000091211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

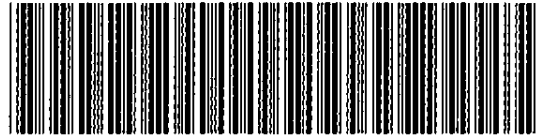
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR
SEP 25 2008
EXAMINER

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Sonotek Research
Requester's Name

Address

City/State/Zip 0565454
Phone #

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. HH Cypress Springs LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- Walk in Pick up time Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name

The name of the Limited Liability Company is:

HH CYPRESS SPRINGS, LLC

ARTICLE II - Address

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

55 NE 5th Avenue
2nd Floor
Delray Beach, Florida 33483

**ARTICLE III - Registered Agent and Office and
Registered Agent's Signature**

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

CORPORATION COMPANY OF ORLANDO
300 South Orange Avenue
Suite 1000 (MJG)
Orlando, Florida 32801-5403

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TALLAHASSEE, FLORIDA
STATE

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, Florida Statutes.

CORPORATION COMPANY OF ORLANDO

By: _____

(Registered Agent's Signature)

Michael J. Grindstaff, Vice President

Andrew S. Eitingon

Signature of a member or an

authorized representative of a member.

Andrew S. Eitingon, Authorized Representative

(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.)