## L12000018722

(Re	questor's Name)	
————(Ad	dress)	
(Ad	dress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

· Office Use Only



200220356692

02/07/12--01020--014 **\*\***125.00

FILED
2012 FEB -7 AN II: 47
SECRETARY OF STATE

J. BRYAN

FEB - 8 2012

**EXAMINER** 



Steven A Walton 412-338-1128 SAWalton@rothmangordon.com

February 3, 2012

VIA FEDEX

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



RE: HISTORY HOUND RESEARCH, LLC

To whom it may concern:

Please find enclosed the following for filing with your section:

- 1. Cover Letter
- 2. Articles of Organization for Florida Limited Liability Company
- 3. Check in the amount of \$125.00 payable to the Florida Department of State

Please provide evidence of filing to me upon filing. A self-addressed, postage prepaid envelope is enclosed for your convenience.

Please call if you have any questions.

Very truly yours,

Steven A. Walton

## **COVER LETTER**

TO:

Registration Section Division of Corporations

ed for filing.  collowing:  f Person  company  ress  and Zip Code  annual report notification)	TALL ANA SSEE. FLORIOR
ompany ress	SEE. FLORION
ompany ress nd Zip Code	Frogor
ompany ress nd Zip Code	(6) F
ress nd Zip Code	
ress nd Zip Code	
nd Zip Code	
nd Zip Code	
annual report notification)	
12 338-1128	
Area Code & Daytime Telephone Numb	oer
rtified Copy Certifica litional copy is enclosed) Certified	Filing Fee, te of Status & I Copy I copy is enclosed)
Street/Courier Address Registration Section	
	Street/Courier Address

ARTICLES OF ORGANIZATION FOR FI	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	LORIDA LIMITED LIABILITY COMPANY
History Hound Research, LLC	
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
507 Southeast 33rd Terrace Cape Coral, FL 33904	<u>same</u>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Carolyn Milne	
Name	
507 Southeast 33rd Terrac	<b>:e</b>
Florida street ad	dress (P.O. Box NOT acceptable)
Cape Coral	FL 33904
City, St	ate, and Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Manager The name and address of each Manager	ng Member(s): or Managing Member is as follows:		
Title: "MGR" = Manager "MGRM" = Managing Member	ng Member(s): or Managing Member is as follows:  Name and Address:  Carolyn Milne  507 Southeast 33rd Terrace Cape Coral, FL 33904		
MGRM	Carolyn Milne 507 Southeast 33rd Terrace Cape Coral, FL 33904		
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date	te of filing: (OPTIONAL)		
	pecific and cannot be more than five business days prior		
REQUIRED SIGNATURE:	Millse r an authorized representative of a member.		
constitutes an affirmation under the	8(3), Florida Statutes, the execution of this document epenalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.)		
Carolyn Milne			
Typed or printed name of signee			
Filing Fees:	•		

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)