

# L0100000 4129

**JK Harris & Company**

50 East 91<sup>st</sup> Street, Suite 200  
Indianapolis, IN 46240

**IRS & STATE TAX PROBLEM RESOLUTION**  
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**Fax 317-569-1280**

**Email: [mail@jkharris.com](mailto:mail@jkharris.com)**

January 23, 2001

Honorable Sandy B. Mortham  
Secretary of State  
Capitol, Plaza Level, Rm. 2  
Tallahassee, FL 32399

900003618009--0  
-01/31/01--01067--003  
\*\*\*\*125.00 \*\*\*\*125.00

RE: HALSCO, LLC

Dear Honorable Sandy Mortham:

Enclosed for filing please find an original and one (1) copy of the Articles of Organization, Affidavit of Membership and Contributions, and Certificate of Designation of Registered Agent/Registration Office in reference to the above-captioned matter. Please file and return the stamped copy back to me in the envelope provided. Also enclosed is a check in the amount of \$125.00 to cover the filing fees of the Articles.

Sincerely,

JK Harris and Company

FILED  
MAR 5 PM 4:26  
STAMPED  
1/23/01

L01-4129  
QR



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

February 1, 2001

JK HARRIS COMPANY  
50 EAST 91ST STREET, SUITE 200  
INDIANAPOLIS, IN 46240

SUBJECT: HALSCO, LLC  
Ref. Number: W01000002451

We have received your document for HALSCO, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include the period of duration, which may be perpetual.

The duration can not be unknown.,

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline  
Document Specialist

Letter Number: 301A00006193

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01 MAR 16 PM 4:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: HALSCO, LLC

## ARTICLE II - Address:

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

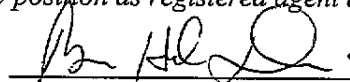
9380 Bone Bluff  
Navarre, Florida 32566

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

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

Bruce Hal Davis  
Name  
9380 Bone Bluff  
Florida street address (P.O. Box **NOT** acceptable)  
Navarre FL 32566  
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

## Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(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.)

Bruce Hal Davis  
Typed or printed name of signer

### 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)

FILED  
01 MAR 16 PM 4:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA