

L030000010805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

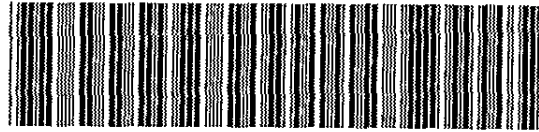
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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147<sup>50</sup>/or

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 MAR 26 PM 12:21

11p

**ROBERT B. COOK, P. A.**

*Attorney and Counselor at Law*

February 26, 2003

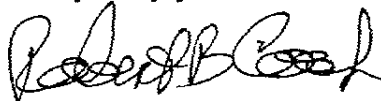
Secretary of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Habahealth, LLC

Gentlemen:

Please find enclosed the original of the articles of organization for the subject for limited liability company. Please provide me with a certified copy of the articles of incorporation after formation. A check in the amount of \$302.50 is enclosed for payment of the following fees under the indicated sub-sections of Chapter 608.452, Florida Statutes.

Very truly yours,



Robert B. Cook

203-6015

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DIVISION OF CORPORATIONS  
MAR 26 PM 12:21



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 3, 2003

ROBERT B. COOK  
ROBERT B. COOK, P.A.  
11911 U.S. HWY ONE, SUITE 201  
NORTH PALM BEACH, FL 33408

SUBJECT: HABAHEALTH, LLC  
Ref. Number: W03000006015

We have received your document for HABAHEALTH, LLC and your check(s) totaling \$302.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

The registered agent must sign accepting the designation.

Enclosed is a refund application for the \$147.50 by which you overpaid, because the fees for LLC's have changed. Please sign, date, and return your application with your corrected or new articles.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 303A00013426

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DIVISION OF CORPORATIONS  
MAR 26 PM 12:21

**ROBERT B. COOK, P. A.**

*Attorney and Counselor at Law*

March 7, 2003

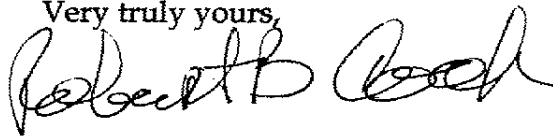
Secretary of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Habahealth, LLC

Gentlemen:

Please find enclosed the original of the articles of organization for the subject for limited liability company, with the executed designation of resident agent. I had previously provided you with a check for \$302.50, and the refund request for \$147.50 is also enclosed.

Very truly yours,



Robert B. Cook

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FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 18, 2003

ROBERT B. COOK  
ROBERT B. COOK, P.A.  
11911 U.S. HWY ONE, SUITE 201  
NORTH PALM BEACH, FL 33408

SUBJECT: HABAHEALTH, LLC  
Ref. Number: W03000006015

We have received your document for HABAHEALTH, LLC and your check(s) totaling \$302.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Thank you for returning your corrected document and your signed refund application. The application has been forwarded for processing, but we are returning your Articles because of the fourth page. As noted in our previous letter, a copy of which is attached, we no longer file affidavits, and your fourth page includes the membership contribution information and refers to the signees as "Affiants" who have been sworn and deposed.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 803A00016657

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**ROBERT B. COOK**  
11911 U.S. Highway One, Suite 201  
North Palm Beach, FL 33408  
561-627-8766 Tel / 561-746-1838 Fax

March 25, 2003

Mr. Lee Rivers  
Florida Dept. of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Dear Mr. Rivers:

Enclosed is the Articles of Organization for Habahealth, LLC with page 4 removed. This is being sent by Federal Express so that I can, hopefully, access the web page for the Secretary of State and obtain the Charter number as soon as possible.

Very truly yours,



Robert B. Cook  
RBC:esp  
Enclosure

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DIVISION OF CORPORATIONS  
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**ARTICLES OF ORGANIZATION**

**OF**

**HABAHEALTH, LLC**

THE UNDERSIGNED, acting as Incorporators of a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, adopts the following Articles of Organization for such limited liability company.

**ARTICLE I - NAME AND COMPANY ADDRESS**

The name, mailing address and the street address of the principal office of this limited liability company is:

HABAHEALTH, LLC  
115 S. Main Street  
Wildwood, Florida 34785

**ARTICLE II - DURATION**

The duration of this limited liability company is perpetual, unless sooner terminated by the provisions of Article III hereof.

**ARTICLE III - TERMINATION**

This limited liability company shall terminate upon the death, retirement, resignation, expulsion, or bankruptcy of a member or any other event which terminates the continued membership of any member in this limited liability company.

**ARTICLE IV - AMENDMENT**

The Articles of Organization may be amended, altered, changed, or repealed by the affirmative vote of a majority of the members, at a members meeting called for that purpose.

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ARTICLE V - REGISTERED AGENT

The name and office address of this limited liability company's registered agent in Florida is:

Robert B. Cook, Esquire  
11911 U.S. Highways One  
Suite 201 North Palm Beach, FL 33408

ARTICLE VI - MEMBERS

The number of Members constituting the initial Membership of this limited liability company is two (2). Additional members may be admitted upon the unanimous consent of the two (2) initial members; thereafter, members may be admitted upon the consent of a majority of the then existing members. The name and address of the initial members are:

<u>Name</u>	<u>Address</u>
John W. Vernon, Jr.	115 S. Main Street Wildwood, Florida 34785
Jared Robert Cowart	5320 Pittman Center Rd. Sevierville, TN 37876

ARTICLE VII - MANAGEMENT

The affairs of this limited liability company are to be managed by a manager, John W. Vernon, Jr., of 115 S. Main Street, Wildwood, Florida 34785 who is to serve as the manager until the first annual meeting of the members or until his successor is elected and qualified.

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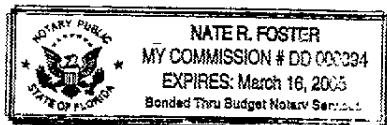


Dated: This 6<sup>th</sup> day of February, 2003.

John W. Vernon, Jr.

Nate R. Foster 2-6-03  
personally known to me

By: John W. Vernon, Jr.



Jared Robert Cowart

By: Jared R. Cowart

STATE OF FLORIDA/TENNESSEE  
COUNTY OF

The foregoing Articles of Organization were sworn to and acknowledged before me this 6<sup>th</sup> day of February 2003, by ~~Jared Robert Cowart, and John W. Vernon, Jr.~~ who are personally known to me, or who have produced Florida/Tennessee driver's licenses as identification.

Cindy J. Rose, Notary Public

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DIVISION OF CORPORATIONS  
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STATE OF FLORIDA  
COUNTY OF Sumter

The foregoing Articles of Organization were sworn to and acknowledged before me this 22 day of February, 2003, by **John W. Vernon, Jr.**, who is personally known to me, or who has produced a Florida driver's license as identification.

Not. R. Foster, Notary Public



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DIVISION OF CORPORATIONS  
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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN THIS STATE  
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

In pursuance of §§48.091(1) and 608.407(d), Florida Statutes,  
the following is submitted in compliance thereof:

That **HABAHEALTH, LLC**, desiring to organize under the laws of  
the State of Florida, designates the name and address of its  
registered agent to accept service of process within this State as  
follows:

ROBERT B. COOK, ESQUIRE  
11911 U.S. Highway One  
Suite 201  
North Palm Beach, FL 33408

**ACKNOWLEDGEMENT:**

Having been named to accept service of process for the above-  
stated limited liability company, at the above-stated address in  
this State, I hereby accept to act in this capacity, and am  
familiar with the obligations imposed by law and agree to comply  
with the provisions of said statute relative to keeping the  
premises open from 10:00 a.m. to noon each day, except Saturdays,  
Sundays, and legal holidays, and to post therein a sign designating  
the name of the limited liability company and the name of its  
registered agent.

BY:



Robert B. Cook

STATE OF FLORIDA  
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me, the  
10 day of March, 2003, by Robert B. Cook, who is personally  
known to me or who has produced a Florida driver's license as  
identification.

 , Notary Public



Edith Papp  
Commission # DD112845  
Expires June 6, 2006  
Bonded Thru  
Atlantic Bonding Co., Inc.

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DIVISION OF CORPORATIONS  
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