



06/02/03--01090--017 **125.00



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 3, 2003

SEAN MURPHY 3608 NARROLINE DR. ORLANDO, FL 32818

SUBJECT: HOOVER-HINES, LLC Ref. Number: W03000015757

We have received your document for HOOVER-HINES, 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):

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 303A00034730

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company is: 3608 NARRDHNE DR. ORLANDO TLORIDA 32818 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: SEAN MURPHY Name 3608 NARRDLINE DR. Florida street address of the registered agent are: SEAN MURPHY Name 3608 NARRDLINE DR. Florida street address (P.O. Box NOT acceptable) ORLANDO, FL 32818 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 (An additional affice must be added if an effective date is requested) Signature of a member or an authorized representative of a member. (In accordance with socion 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.)	ARTICLE I - Name: The name of the Limited Liability Company is: Lower - Né5", LC
The name and the Florida street address of the registered agent are: SEAN MURPHY Name 360 8 NARROLINE DR. Florida street address (P.O. Box NOT acceptable) OLLANDO, FL 32818 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 (An additional price 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 facis stated herein are true.)	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
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Typed or printed name of signee	SEAN MURPHY Typed or printed name of signer

Filing Fees:
\$190.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)