# W3000033341

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
☐ PICK-UP ☐ WAIT ☐ MAIL	
(Business Entity Name)	
(Dusiness Entity (varie)	
(Document Number)	
(Document Number)	ſ
Certified Copies Certificates of Status	-
Seranda Copies Seranda Copies	_
Special Instructions to Filing Officer:	
FLLC CC+CUS	
a .	
14	
Office Use Only	



200022413522

09/04/03--01007--001 \*\*160.00

MJH :

PILED

03 SEP -4 AM 9: 03

ALLAHASSE FISIALE

#### BRIGHTON & RUNYON, P.A.

ATTORNEYS AT LAW
45 MAIN STREET SUITE 22
POST OFFICE BOX 674
PETERBOROUGH, N.H. 03458-0674

KENNETH C. BRIGHTON
JOSEPH J. BYK, JR.
JAMES M. CALLAHAN
L. PHILLIPS RUNYON III
WILLIAM E. STRICKLAND, JR.

KENNETH A. BRIGHTON RETIRED

TELEPHONE (603) 924-3050 FAX (603) 924-9764

September 3, 2003

ATTN: MICHELLE HODGES Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re: Honkala Holdings Company, LLC

Dear Ms. Hodges:

Enclosed please find the Articles of Incorporation for Honkala Holdings Company, LLC, and a check in the amount of \$160.00 for filing with the State of Florida, Designation of Registered Agent, Certified Copy and Certificate of Status.

Thank you for your help in expediting this matter.

Richall Bournan

Very truly yours,

Rachael Bowman for

James M. Callahan

Enclosures

Fed Ex: 835737270586

## TRANSMITTAL LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: Honkala Holdings Company,	LLC
<del></del>	ed Liability Company)
The enclosed Articles of Organization and fee	(s) are submitted for filing
The discount interest of organization and for	(b) are suchimed for imag.
Please return all correspondence concerning the	nis matter to the following:
Scott Honkala	
(Name of Person)	
(Firm/Company)	
(rim/Company)	
207 7-76- 110	
304 Route 119 (Address)	<u> </u>
(	
Rindge, New Hampshire 03461	
(City/State and Zip Code)	<del></del>
For further information concerning this matter	nlassa call
To rainer mornation concerning this matter	, prease can.
James M. Callahan (Name of Person)	at (603)924-3050 (Area Code & Daytime Telephone Number)
(Name of Leison)	(Area Code & Daytime Telephone Number)
CERTIFICATION AND THE	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee Florida 32399 Tallahassee Florida 32314	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	TOI	F	<b>X</b> _ Y	Nom	٥.

The name of the Limited Liability Company is: Honkala Holdings Company, LLC

#### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:
304 Route 119	304 Route 119
Rindge, New Hampshire 03461	Rindge, New Hampshire 03461
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered Keith Honkala Name	red agent are:  ALLAHASSI
6915 Paul-Mar Drive	
Florida street address (P.O. Box	NOT acceptable)
Lantana FL	33462 <u>Ş</u>
City, State, and Zip	<u> </u>
Marina have a marind as a salature described and the second	

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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Mana	ager
"MGRM" = Ma	anaging Member
MGRM	Scott Honkala
	304 Route 119
	Rindge, New Hampshire 03461
	<u> </u>
	<del> </del>
(Use attachmen	t if necessary)
	,,
NOTE: An ad	ditional article must be added if an effective date is requested.
REQUIRED S	IGNATURE:
	$\mathcal{A} = \mathcal{A} \cup \mathcal{A}$
	DUST 1 HOUR
	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.)
	Scott Honkala
	Typed or printed name of signee
	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)