

64000017409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies 1

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

1/30

FILE

cc

Office Use Only



500027593195

**NJN**

02/02/04--01032--020 \*\*155.00

FILED  
04 JAN 30 AM 9:24  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** H. STRICKLAND LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Rappaport, Corporate Services Department  
(Name of Person)

Wolf, Block, Schorr and Solis-Cohen LLP  
(Firm/Company)

1650 Arch Street, 22nd Floor  
(Address)

Philadelphia, PA 19103  
(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Rappaport at ( 215 ) 977-2545  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

H. STRICKLAND LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

c/o The Goodman Company

777 South Flagler Drive

West Palm Beach, Florida 33401

**Mailing Address:**

c/o The Goodman Company

777 South Flagler Drive

West Palm Beach, Florida 33401

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

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

William A. Shewalter

Name

c/o The Goodman Company, 777 South Flagler Drive

Florida street address (P.O. Box **NOT** acceptable)

West Palm Beach FLORIDA 33401

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, Florida Statutes..*



Registered Agent's Signature

William A. Shewalter

FILED  
04 JAN 30 AM 9:24  
TALLAHASSEE, FLORIDA

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

"MGR" \_\_\_\_\_

Goodman Properties, Inc. \_\_\_\_\_

c/o The Goodman Company \_\_\_\_\_

777 South Flagler Drive \_\_\_\_\_

West Palm Beach, Florida 33401 \_\_\_\_\_

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
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.)

Deborah Rappaport, Organizer \_\_\_\_\_

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fees:**

\$180.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)