1040000/7009

(Re	(Requestor's Name)		
(Ac	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	⇒ #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
	•	•	
(Do	cument Number)		
(3)			
Certified Copies	Certificates	of Status	
ocialiod copies	_ Cerunicates	or Status	
r 			
Special Instructions to I	Filing Officer:		
		1	
		ţ	
		- 1	

Office Use Only



900028366429

03/03/04--01036--013 **25.00

02/10/04--01024--010 **100.00

100%



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 19, 2004

BARBARA GURAK 6210 TOWNCENTER CIRCLE NAPLES, FL 34119

SUBJECT: HOGAN BROTHERS, LLC

Ref. Number: W04000007188

We have received your document for HOGAN BROTHERS, LLC and check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

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) 245-6020.

Letter Number: 004A00011450

Tammi Cline Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

TRANSMITTÁL LETTER

SUBJECT: Hogan Brothers, 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: Barbara Gurak (Name of Person) Hogan Brothers (Firm/Company) 6210 Towncenter Circle (Address) Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call: Barbara Gurak (Name of Person) (Area Code & Davrings Telephone Number)	TO: Registration Section Division of Corporations			
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Barbara Gurak (Name of Person) Hogan Brothers (Firm/Company) 6210 Towncenter Circle (Address) Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call:	SUBJECT: Hogan Brothers, LLC			
Please return all correspondence concerning this matter to the following: Barbara Gurak (Name of Person) Hogan Brothers (Firm/Company) 6210 Towncenter Circle (Address) Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call:	(Name of Limited Liability Company)			
Barbara Gurak (Name of Person) Hogan Brothers (Firm/Company) 6210 Towncenter Circle (Address) Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call:	The enclosed Articles of Organization and fee(s) are submitted for filing.			
(Name of Person) Hogan Brothers (Firm/Company) 6210 Towncenter Circle (Address) Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call:	Please return all correspondence concerning this matter to the following:			
Hogan Brothers (Firm/Company) 6210 Towncenter Circle (Address) Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call:	Barbara Gurak			
(Firm/Company) 6210 Towncenter Circle (Address) Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call:	(Name of Person)			
Maples, Florida 34119 Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call:				
Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call: Barbara Gurak (Address)	(Firm/Company)			
Naples, Florida 34119 (City/State and Zip Code) For further information concerning this matter, please call: Barbara Gurak at (239) 514-2523				
For further information concerning this matter, please call: Barbara Gurak at (239) 514-2523	(Address)	33 C/.	Ç.	
For further information concerning this matter, please call: Barbara Gurak at (239) 514-2523	Naples, Florida 34119	_===		
Barbara Gurak at (239) 514-2523 □ 1	(City/State and Zip Code)	ASS	نت. د	· ·
	For further information concerning this matter, please call:	in.	n ege	5 y
		Single Single	Ç.S	
		<u> </u>	. "	

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 LÏABILITY COMPANY

Hogan Brothers, LLC		
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Con	npany is:
Principal Office Address:	Mailing Address:	
6210 Towncenter Circle	Same	
Naples, FLorida 34119		
	ered Office, & Registered Agent's Signature	e:
ARTICLE III - Registered Agent, Registe The name and the Florida street address of t	he registered agent are:	, c
	he registered agent are:	, c
The name and the Florida street address of t Barbara Gurak	he registered agent are:	
The name and the Florida street address of t Barbara Gurak	the registered agent are:	
The name and the Florida street address of the name and the name a	the registered agent are:	

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 §08, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (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" = Manager		
"MGRM" = Managing Member		
MGR	Barbara Gurak	
	6210 Towncenter Circle	
	Naples, FL 34119	
		
		
(Use attachment if necessary)		**
		د کالیا
NOTE: An additional article must be	e added if an effective date is requested.	
REQUIRED SIGNATURE:)A
Signature of a member or an	authorized representative of a member.	
	3.408(3), Florida Statutes, the execution	
of this document constitutes an	affirmation under the penalties of perjury	
that the facts stated herein are t	rue.)	
Barbara Gurak		
Typed or pr	rinted name of signee	

Filipg 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)