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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Michael Hampton 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:

Michael F. Hampton  
(Name of Person)

Michael Hampton LLC  
(Firm/Company)

38178 Overbrook Blvd.  
(Address)

Zephyrhills, FL. 33541  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael F. Hampton at ( 813 ) 714-4033  
(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

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Michael Hampton LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

38178 Overbrook Blvd.  
Zephyrhills, FL. 33541

**Mailing Address:**

38178 Overbrook Blvd.  
Zephyrhills, FL. 33541

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

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

Michael F. Hampton  
Name

38178 Overbrook Blvd.  
Florida street address (P.O. Box **NOT** acceptable)

Zephyrhills, FL. 33541  
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..*

Michael F. Hampton  
Registered Agent's Signature

(CONTINUED)

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

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Michael F. Hampton
	38178 Overbrook Blvd.
	Zephyrhills, FL. 33541

ARTICLE V - Effective Date March 8, 2004

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

REQUIRED SIGNATURE:

Michael F. Hampton  
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.)  
Michael F. Hampton  
\_\_\_\_\_  
Typed or printed name of signee

- Filing Fees:**  
\$186.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)