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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BK



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 550160 4374758

AUTHORIZATION : *Patricia Pizeto*

COST LIMIT : \$ 160.00

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TALLAHASSEE, FLORIDA

ORDER DATE : April 6, 2004

ORDER TIME : 2:13 PM

ORDER NO. : 550160-005

CUSTOMER NO: 4374758

CUSTOMER: Robert O. Meyer
Van Beuren Management, Inc.

330 South Street
Po Box 1975
Morristown, NJ 07962-1975

DOMESTIC FILING

NAME: HOPYLDER LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
04 APR -6 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

HOPLYDER 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:

690 Tropical Circle

690 Tropical Circle

Sarasota, FL 34242

Sarasota, FL 34242

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

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

Phillip A. Meyer

Name

690 Tropical Circle

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

Sarasota,

FLORIDA 34242

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..

By: 

Registered Agent's Signature

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 & MGRM

Philip A. Meyer
690 Tropical Circle
Sarasota, FL 34242

MGRM

Stephanie Meyer
690 Tropical Circle
Sarasota, FL 34242

(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.)

By: Philip A. Meyer

Typed or printed name of signer

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)