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SECRETÁRY OF STATE

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: LOTEN Hitch cock, 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 the concerning this matter to the following the concerning this matter to the following the concerning this matter to the following this matter than the following the following this matter than the following the following this matter than the following	
(Name of Person)	
(Firm/Company)  7501 14274 AUE N. # 593	·
(Address)  LACGO, FC 33701  (City/State and Zip Code)	
(City/State and Zip Code)  For further information concerning this matter, please call:	SECRET O4 APR
Losen Hitchcock at (1007) 343-529  (Name of Person) (Area Code & Daytime Telephone N	-9 PI

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:	
LOTER Hitchcock, LLC	<u> </u>
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com	ipany is:
Principal Office Address: Mailing Address:	`
7501 142nd AUE. N. #593	
LArgo, FC 33771	
	SEC SEC
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:	ARY STREET
Loren Hitchcock	PH S IME
7501 142nd AUE N. # 593 Florida street address (P.O. Box NOT acceptable)	70
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

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: "MGR" = Manager "MGRM" = Managing Member THE An additional article must be added if an effective date is requested. REQUIRED SIGNATURE:

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)

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

yped or printed name of signee

that the facts stated herein are true.)