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2004 APR 15 P 3: 53



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## TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

\*\*TOTAL APR 15 P\*\*

SUBJECT: Harlan Enterprises Ltd. Co. TALLAHASSEE, FLO

(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:

\*\*Take H. Williams\*\*

(Name of Person)

(Firm/Company)

\*\*TOTAL APR 15 P\*\*

\*\*TOTAL TARY OF ST. TARY

STREET ADDRESS:

(Name of Person)

Jake Williams

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

at (850) 650 9779 (Area Code & Daytime Telephone Number)

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR

FILED

## FOR FLORIDA LIMITED LIABILITY COMPANY PR 15 P 3: 53

ARTICLE I - Name: The name of the Limited Liability Company is:	TALLAHASSEE, FLORIDA			
Harlan Enterprises Ltd. Co.				
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1173 Bay Ct	1173 Bay C+			
Destin FL 32541	Destin FL 32541			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:				
Take Williams Name				
1173 Bay Ct. Florida street address (P.O. Box N	OT acceptable)			
Dest. A, City, State, and Zip	LORIDA, 32541			

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)

FII ED

ARTICLE IV- Manager(s) or Managi	ng Member(s):	· 'LED
The name and address of each Manager	or Managing Member is as fol	lows:
ARTICLE IV- Manager(s) or Manager The name and address of each Manager  Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
MGRM	Jake Williams 1173 Roy Ct. Destin FZ 32541	
MGRM	Caitlan Williams 1173 Ray Ct Destin FL 32541	
(Use attachment if necessary)		
NOTE: An additional article must be	e added if an effective date is	requested.
REQUIRED SIGNATURE:		
AT .		
Signature of a member or an a	uthorized representative of a men	ıber.
of this document constitutes and that the facts stated herein are tr	.408(3), Florida Statutes, the executi affirmation under the penalties of pe rue.)	ion rjury
Take Williams Typed or pr	inted name of signee	_

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)