

L04000032299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name
Availability

Document

Examiner

Office Use Only

Updater

Updater

Verifier

Admission

Buyer



400032708204

04/21/04--01043--025 **125.00

FILED

2004 APR 21 P 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**WICKENS
HERZER
PANZA
COOK &
BATISTA**

A LEGAL PROFESSIONAL ASSOCIATION

David L. Herzer

Attorney at Law

dherzer@wickenslaw.com

Direct Dial: 440-930-8065

Main: 440-930-8000

Cleveland: 216-447-4418

Facsimile: 440-937-4466

35765 Chester Road
Avon, OH 44011-1262

April 20, 2004

VIA UPS NEXT DAY AIR
UPS TRACKING NO. N453 181 344 6

SECRETARY OF STATE OF FLORIDA
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Formation of Hamilton Park Sales, LLC

Dear Sir/Madam:

Enclosed herewith for filing please find copies of the signed original Articles of Incorporation form which is being submitted on behalf of the above-designated entity.

Also enclosed is a check in the amount of \$125.00 as the requisite filing fee in this regard. If you have any questions, please call me collect at the above number.

Thanking you in advance for your prompt attention to this matter, I remain

Sincerely yours,

WICKENS, HERZER, PANZA, COOK & BATISTA
A Legal Professional Association



By: David L. Herzer

DLH/MGW/lmm
Enclosures

FILED
2004 APR 21 P 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hamilton Park Sales, 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:

David L. Herzer, Esq.

(Name of Person)

Wickens, Herzer, Panza, Cook & Batista

(Firm/Company)

35765 Chester Road

(Address)

Avon, Ohio 44011-1262

(City/State and Zip Code)

For further information concerning this matter, please call:

David L. Herzer

(Name of Person)

at (440) 930-8065
(Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 APR 21 P 3:35

FILED

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:

Hamilton Park Sales, LLC

ARTICLE II - Address:

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

Principal Office Address:

1700 McMullen Booth Road, Suite C1

Clearwater, Florida 33759-2130

Mailing Address:

1700 McMullen Booth Road, Suite C1

Clearwater, Florida 33759-2130

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

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

Ross A. Puzzitiello

Name

1700 McMullen Booth Road, Suite C1

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

Clearwater

FLORIDA 33759-2130

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

Ross A. Puzzitiello

FILED
2004 APR 21 P 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

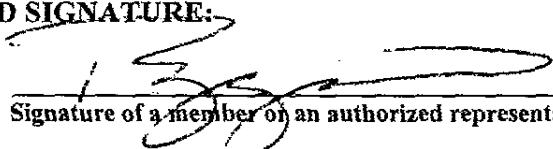
Name and Address:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

(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.)

Ross A. Puzzitiello

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)

FILED
2009 APR 21 P 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA