

W04000052528

00789-02727-00671 INC

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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W04-25483



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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HAGLUND DEVELOPMENT CORP 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:

SUSAN TAMONEY  
(Name of Person)

HAGLUND DEVELOPMENT CORP  
(Firm/Company)

18598 LAKESIDE GARDENS DR  
(Address)

JUPITER, FL 33458  
(City/State and Zip Code)

For further information concerning this matter, please call:

STEVE HAGLUND at (561) 309-5170  
(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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

July 6, 2004

SUSAN TAMONEY  
HAGLUND DEVELOPMENT CORP  
18598 LAKESIDE GARDENS DR  
JUPITER, FL 33458

SUBJECT: HAGLUND DEVELOPMENT CORP LLC  
Ref. Number: W04000025683

We have received your document for HAGLUND DEVELOPMENT CORP LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "INC." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 904A00043330

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

HAGEN DEVELOPMENT ~~LLC~~ LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

18598 LAKESIDE GARDENS DR

JUPITER, FL 33458

**Mailing Address:**

18598 LAKESIDE GARDENS DR

JUPITER, FL 33458

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

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

SUSAN TAMONEY

Name

18598 LAKESIDE GARDENS DR

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

JUPITER FLORIDA 33458

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..*

Susan H Tamoney

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:**

MGRM

STEVE HAGLUND

OCEAN WALK

JUPITER, FL 33477

MGR

SUSAN TAMONEY

18598 LAKESIDE GARDENS DR

JUPITER, FL 33458

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Susan H Tamoney  
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.)

SUSAN H TAMONEY  
Typed or printed 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)