

L04000057331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

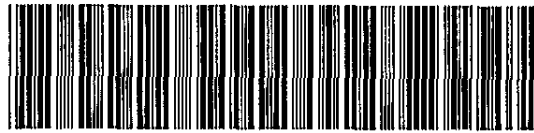
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
04 AUG -3 PM 11:00
DIVISION OF CORPORATION

BR

FILED
04 AUG -3 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 Fax (850) 222-1666

WALK IN

PICK UP

8/31 @

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04 AUG -3 11:00
TALLAHASSEE, FLORIDA

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LLC

1.) Hopewell Enterprises, LLC
(CORPORATE NAME & DOCUMENT #)

2.)
(CORPORATE NAME & DOCUMENT #)

3.)
(CORPORATE NAME & DOCUMENT #)

4.)
(CORPORATE NAME & DOCUMENT #)

5.)
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

ARTICLES OF ORGANIZATION
OF
HOPEWELL ENTERPRISES, LLC
a Florida Limited Liability Company

FILED
04 AUG -3 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I
Name

The name of this Limited Liability Company is **HOPEWELL ENTERPRISES, LLC** (the "Company").

ARTICLE II
ADDRESS

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

8913 E. Martin Luther King Blvd.
Tampa, FL 33610

ARTICLE III
DURATION

The Company's existence shall commence upon the acceptance of the Articles of Organization by the Secretary of State of Florida and shall continue in existence until the expiration of fifty (50) years from such commencement date, unless sooner terminated, liquidated, or dissolved by law or by the unanimous consent of the Members.

ARTICLE IV
MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is therefore, a member-managed company. The name and address of the managing member(s) is, as follows:

Carl Larson
8913 E. Martin Luther King Blvd.
Tampa, FL 33610

**ARTICLE V
REGISTERED AGENT AND REGISTERED OFFICE**

The name and the Florida street address of the Registered Agent is:

Carl Larson
8913 E. Martin Luther King Blvd.
Tampa, FL 33610

**HOPEWELL ENTERPRISES, LLC,
a Florida limited liability company**

By: Carl Larson
Carl Larson
Its: Managing Member

**STATE OF FLORIDA
COUNTY OF HILLSBOROUGH**

The foregoing instrument was acknowledged before me this 30th day of July, 2004, by **Carl Larson**, as the Managing Member of **HOPEWELL ENTERPRISES, LLC**, a Florida limited liability company, who is personally known to me or produced FL DL as identification, on behalf of the limited liability company.

Witness my hand and official seal in the county and state last aforesaid on the day and year first written above.

My Commission Expires: 9/22/07

Erin B. Bostock
Notary Public, State of Florida



Erin B. Bostock
MY COMMISSION # DD252485 EXPIRES
September 22, 2007
BONDED THRU TROY FAY INSURANCE, INC.

ACCEPTANCE OF REGISTERED AGENT


Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a Registered Office and Registered Agent in the State of Florida:

The name of the Limited Liability Company is: **HOPEWELL ENTERPRISES, LLC.**

The name and Florida street address of the Registered Agent is:

Carl Larson
8913 E. Martin Luther King Blvd.
Tampa, FL 33610

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.

 (SEAL)
Carl Larson