Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

JIVISION OF CORPORATION

: HUBCO Account Name

Account Number : 104662003400

Phone

(516)935-3940

Fax Number

(516) 935-3088

LIMITED LIABILITY COMPANY

Fireman 4 Hire LLC

Certificate of Status	11
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Corporate, Filing.

Rublic Access Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Fireman 4 Hire LLC

ARTICLE II - Address

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

Principal Office Address:	Mailing Address:
8717 Laredo Street	8717 Laredo Street
Navarre, FL 32566	Navarre, FL 32566
	·
ARTICLE III - Registered Agent, Registered Office The name and Florida street address of the registered agent are: Matthew Koenig	: _{5,}
3 (Name
8717 Laredo Str	reet
(P.O. Box or N	Mail Drop Box NOT Acceptable)
Navarre, FL 325	566 ¹
(C	ilty / State / Zip)
Having been named as registered agent and to accept servi at the place designated in this certificate, I hereby accept th capacity. I further agree to comply with the provisions of all of my duties, and I am familiar with and accept the obligation Chapter 608, F.S. Registered Agent's Sign	ne appointment as registered agent and ligree to act in this Il statutes relating to the proper and complete performance

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<u>Fitle:</u> MGR" = Manager 'MGRM" = Managing Mer	Name and Address:
MGR	Matthew Koenig-8717 Laredo Street, Navarre, FL 32566
	•
Use attachment if necessa	ry) ·
CEQUIRED SIGNATU	RE:
	Matthew A Kaonia
=	
Si	gnature of a member or authorized representative of a member.
(In a doct	gnature of a member or authorized representative of a member. accordance with section 608.408(3), Florida Statutes, the execution of this ament constitutes an affirmation under the penalties of perjury that the facts and herein are true.)
(In a doct	accordance with section 608.408(3), Florida Statutes, the execution of this ament constitutes an affirmation under the penalties of perjury that the facts

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SECRETARY OF STATE TALLAHASSEEL FLORIDA