TH

# 105000054030

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Only Carto Liph Hone II)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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105-54030

# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Horizon Group Realty 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:
Mame of Person)
Horizon Group Realt (Ic
6753 Thomasoille Rd Soite 108-44
Tallahassae F1. 32312 (City/State and Zip Code)
For further information concerning this matter, please call:
Breat Edy at (850) S44-9494 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & \$\Bigcup \\$155.00 Filing Fee & \$\Bigcup \\$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
STREET ADDRESS: MAILING ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The r	name of the Lin	mited Liability C	lompany is:			
	Horizon	Group	Realty	Lic		
ART	ICLE II - Ado	dress:				
The r	nailing address	s and street addre	ess of the principa	d office of th	e Limited Liabili	ty Company is:

Principal Office Address:	Mailing Address:			
6753 Thomasville Rd #10844	6753 thomasville Road # 108-40			
Tallabasse F1. 32312	Tallahassen Fl. 32312			

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

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

ARTICLE I - Name:

Prent Endy

Name

1625 Cherry Hill Lane

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

Tallahasses FL 32212

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, F.S.

Registered Agent's Signature

(CONTINUED)

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Breat Ende 1625 Chern Hill La Pallabasse Fl. 2212
(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.)

Typed or printed name of signee

### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)