L05000106594

(Re	eguestor's Name)	
(Ad	Idress)	
(Ao	dress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Coples		of Status
Special Instructions to	Filing Officer:	
		1

Office Use Only



600060904136

10/31/05--01034--010 **160.00

FILED
2005 OCT 31 PH 1: 47
DIVINION CORPORATION

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: The H	iwan Group, L.L.C	·	
	(Name of Limite	d Liability Company)	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Robert W	. Howard		
	(1	Name of Person)	1,11
The Hiwa	n Group, L.L.C.		
		Firm/Company)	200
P.O. Box	2845		新·
		(Address)	67 F
New Sm	yrna Beach, FL	32170	707
		/State and Zip Code)	
For further information	concerning this matter, please	call:	
Edward H. Bea	azlev. Jr.	at (386) 690-67	09
	of Person)	(Area Code & Daytime To	
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLE I - Name:	
The name of the Limited Liability Compar	ny is:
	1. S. C. 3.
The Hiwan Group, L.L.C.	
(Must end with the words "Limited Liability Company,"	"Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	The state of the s
	the principal office of the Limited Liability Company is:
P. 1. 1000 111	
Principal Office Address:	Mailing Address:
2802 Bay Vista Court	P.O. Box 2845
New Smyrna Beach, FL 32168	New Smyrna Beach, FL 32170
	÷
(The Limited Liability Company cannot serve as its own	
business entity with an active Florida registration.) The name and the Florida street address of	•
The name and the Florida street address of Edward H. Beazley,	the registered agent are:
The name and the Florida street address of Edward H. Beazley,	the registered agent are:
The name and the Florida street address of Edward H. Beazley,	the registered agent are: Jr. Name
The name and the Florida street address of Edward H. Beazley, 221 North Causewa	the registered agent are: Jr. Name
The name and the Florida street address of Edward H. Beazley, 221 North Causewa	the registered agent are: Jr. Name ay
The name and the Florida street address of Edward H. Beazley, 221 North Causew. Florida street New Smyrna Beach	The registered agent are: Jr. Name ay eet address (P.O. Box <u>NOT</u> acceptable)
The name and the Florida street address of Edward H. Beazley, 221 North Causew. Florida street New Smyma Beach City, S Having been named as registered agent an liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and complete.	The registered agent are: Jr. Name ay eet address (P.O. Box NOT acceptable) FL 32168

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	_
MGR	Robert W. Howard
	P.O. Box 2845
	Robert W. Howard P.O. Box 2845 New Smyrna Beach, FL 32170 Linda P. Howard P.O. Box 2845 New Smyrna Beach, FL 32170
MCDM	Linds D. Hausand
MGRM	Linda P. Howard P.O. Box 2845
	New Smyma Beach, FL 32170
	New Sillytha Beach, FL 32170
G7 (/ 1 / 10 / 10 / 10 / 10 / 10 / 10 / 10	
(Use attachment if necessary)	
OTICS E V. Effective data if other than	the date of filing: (OPTIONAL)
A receeve date, it office that	st be specific and cannot be more than five business days prior
o or 90 days after the date of filing.)	se be specific and cannot be more than tive business days prior
or 70 days after the date of imag.)	
REQUIRED SIGNATURE:	shop there
So d	Mu
Signature of a me	ember 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.)

Edward H. Beazley, Jr., Attorney At Law, for Robert W. Howard 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)