

FEB-13-1900 22:54

L 06000002010

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000003559 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : ACCOUNTING & BEYOND  
Account Number : I19990000223  
Phone : (813) 998-9800  
Fax Number : (813) 935-9982

RECEIVED  
06 JAN -5 PM 2:52  
DIVISION OF CORPORATION

W06-635

FLORIDA/FOREIGN LIMITED LIABILITY CO.

HARTFORD STREET OUTDOOR STORAGE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

FILED  
06 JAN -6 AM 8:11  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help



January 6, 2006

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

ACCOUNTING & BEYOND

SUBJECT: HARTFORD STREET OUTDOOR STORAGE, LLC  
REF: W06000000635

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Article IV is missing the title of the MGR or MGRM.

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) 245-6958.

Lee Rivers  
Document Specialist

FAX Aud. #: H06000003559  
Letter Number: 406A00001020

RECEIVED

06 JAN -6 PM12:03

DIVISION OF CORPORATION

RECEIVED  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

JAN -6 AM 8:11

FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

HARTFORD STREET OUTDOOR STORAGE, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

**ARTICLE II - Address:**

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

**Principal Office Address:****Mailing Address:**

6106 HARTFORD STREET  
GIBSONTON, FL 33619

6106 HARTFORD STREET  
GIBSONTON, FL 33619

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ARMANDO ARROYO, JR.

Name

6106 HARTFORD STREET

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

GIBSONTON, FL 33619

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED  
06 JAN -6 AM 8:12  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**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:**MGRARMANDO ARROYO, JR.6106 HARTFORD STREETGIBSONTON, FL 33619

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

ARMANDO ARROYO, JR.

Typed or printed name of signer

**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)

FILED  
 06 JUN 6 AM 8:12  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA