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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Hilling Officer:				
eff. date (3/1) received 3/13				
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Office Use Only

Water 133-13



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SECREDANT OF STATE

COVER LETTER

TO:	Registration Division of 0				
SUBJE	ст:	OREY HAYES (Name of Limite	DEVELOPMENT	uc.	
		' (Name of Limite	d Liability Company)		
The end	closed Articles	of Organization and fee(s) are s	ubmitted for filing.		
Please 1	return all corre	spondence concerning this matte	er to the following:		
		LORE	Y HAYES Name of Person)		
			Name of Person)		
	COREY HAYES DEVELOPMENT LLC.				
	(Firm/Company)				
_	12015 COUNTRY CLUB DRIVE (Address)				
	PANAMA CITY, FL 32404				
•		(City	/State and Zip Code)		
For furt	her informatio	n concerning this matter, please	cail:		
	LOREY (Na	HAYES ne of Person)	at (\$50) \$19 - (Area Code & Daytime Te	9166 lephone Number)	
Enclos	ed is a check	for the following amount:			
⊒\$ 125	.00 Filing Fe	E \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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	IS	



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 20, 2006

COREY HAYES 12015 COUNTRY CLUB DRIVE PANAMA CITY, FL 32404

SUBJECT: COREY HAYES DEVELOPMENT LLC.

Ref. Number: W06000013343

We have received your document for COREY HAYES DEVELOPMENT LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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) 245-6853.

Leslie Sellers Document Specialist

Letter Number: 706A00018882

FROM : COREY HAYES DEVELOPMENT

FAX NO. :8502153017

May. 12 2006 01:52PM P2

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: COREY HAVES DEVELOPMENT 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:					
CORECT HAVES					
(Name of Person)					
COREY HAYES DEVELOPMENT LLC.					
(Firm/Company)					
17015 COUNTRY CLUB DRIVE					
(Address)					
PANAMA CITY FL 37404					
(Chy/State and Zip Code)					
For further information concerning this matter, please call:					
COREU HAUES #(850) \$19-9160 (Name of Person) (Area Code & Daytime Telephone Number)					
(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$125.00 Filing Fee \$\sum \$130.00 Filing Fee & \$\sum \$155.00 Filing Fee & \$\sum \$160.00 Filing Fee, Certificate of Status & Certificate of Status &					
FLREAPY PAID (additional copy is enclosed) 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 ADTICT FIL NAME.

Principal Office Address:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
COREY HAVES DEVELOPMENT LLC. (Minst end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")	3000
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com	apany is:

Mailing Address:

	•
12015 County Slub Drive	17015 Country Club Dave
Panaura Cital A 32404	17015 Country Club Drive PENAMA City C1 32404

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company capnot serve as its own Registered Agent. You must designate an individual or mother business entity with an active Florida registration.)

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

COREY HAYES

Name

12015 Country Club Ptive

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

Panguna City FL 32404

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 SECRETARY OF STATE

APPROVED

FAX NO. :8502153017

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

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

<u>litle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
MGRM	CORFY HAYES 17015 COINTRY CLUB PR PROMING CITY, EL 32404
MGR_	CARMEN HAYES 17015 COUNTRY CLIB DR PANAMA CITY OL 32401
· · · · · · · · · · · · · · · · · · ·	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \(\sigma_1 \sigma_2 \si

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)

Page 2 of 2

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APPHOVED