Electronic Filing Cover Sheet

Public Access System

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.

(((H06000159890 3)))

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

Division of Corporations

Pax Number : (850)205-0383

: RAJESH PATEL Account Name Account Number : I20060000092 Phone : (813)991-7865 Fax Number : (813)991-7865

	_	
. . 	Hawthorne Ros	id, LLC
	Certificate of Status	1
-	Certified Copy	0
	Page Count	03
	Estimated Charge	\$130.00

Mengo

Corporate Pilipa Vienn

Halp

and citle sumble org/scripts/efilcovr.exe

The name of the Limited Liability Company is: HAMTHMENE Load LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company Principal Office Address: Mailing Address: 10226 GALDEN ALCOYE DENKE 10226 GALDEN ALCOYE DENKE TAM A	ARTICLE I - Name:	•
(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 Principal Office Address: Mailing Address: Mailing Address: 10226 GALDEN ALCOVE DLIVE TAMPA FL. 33647 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 quantifier business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: LATESH V PATEL Name 10226 GALDEN ALCOVE PLIVE Florida street address (P.O. Box NOT acceptable) TAMPA FI. 33647	The name of the Limited Liability Compa	ny is:
(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 Principal Office Address: Mailing Address: Mailing Address: 10226 GALDEN ALCOVE DLIVE TAMPA FL. 33647 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 quantifier business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: LATESH V PATEL Name 10226 GALDEN ALCOVE PLIVE Florida street address (P.O. Box NOT acceptable) TAMPA FI. 33647		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company Principal Office Address: Mailing Address: Mailing Address: Mailing Address: 10226 GALDEN ALCOYE DENC 10226 GALDEN ALCOYE OFFICE TAMPA FL. 33647 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 drampther business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: CATESH Y CATEL Name		
The mailing address and street address of the principal office of the Limited Liability Companies. Principal Office Address: Mailing Address: Mailing Address: 10226 GALDEN ALCOVE DENCE TAM (A FL. 33647 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 designate an individual designate and the Florida registration.) The name and the Florida street address of the registered agent are: LATESH V	(Must end with the words "Limited Liability Company,	"Limited Company" or their abbreviation "LLC," or "L.C.,")
Principal Office Address: 10216 GALDEN ALCOVE DENCE 10216 GALDEN ALCOVE DENCE TAMPA FL. 33647 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limbol Limbility Company cannot serve as its own Registered Agent. You must designate an individual graphiter business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: LATESH V. LATEL Name 10226 GALDEN ALCOVE PLAVE Florida street address (P.O. Box NOT acceptable) TAMPA FL. 33647		
10226 CALDEN ALCOYE DEVE 10226 CALDEN ALCOYE DEVE TAMPA TAMPA TAMPA FL. 33647 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 designate an individual designate and individual	The mailing address and street address of	the principal office of the Limited Liability Compan
TAMIA FL. 33647 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 distribute business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: LATESH V	Principal Office Address:	Malling Address:
TAMIA FL. 33647 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 distributed business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: LATESH	10226 GALDEN ALCOVE DENE	10226 GALDEN ALCOVE DELVE
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 of another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: LATESH	TAMPA .	TANIA
(The Limbed Liability Company cannot serve as its own Registered Agent. You must designate an individual of similar business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: CATESH V CATEL Name CATESH Name CATESH Florida street address (P.O. Box NOT acceptable) TAMA H. 33644	FL. 33647	FL. 33647
City, State, and Zip	<u> </u>	Name ES
	Florida st TAMA City, Having been named as registered agent a Itability company at the place designal registered agent and agree to act in this a stolutes relating to the proper and come	FL 33644 State, and Zip and to accept service of process for the above stated linted in this certificate, I hereby accept the appointment apacity. I further agree to comply with the provisions alese performance of my duties, and I am familiar with
Λ D	Florida st TAMA City, Having been named as registered agent a liability company at the place designal registered agent and agree to act in this a statutes relating to the proper and communication.	State, and Zip and to accept service of process for the above stated linited in this certificate, I hereby accept the appointment apacity. I further agree to comply with the provisions alese performance of my duties, and I am familiar with
lulita	Florida st TAMA City, Having been named as registered agent a liability company at the place designal registered agent and agree to act in this a statutes relating to the proper and compactory the obligations of my position of the proper and compactory the obligations of the proper and c	FL 33644 State, and Zip and to accept service of process for the above stated litted in this certificate, I hereby accept the appointment apacity. I further agree to comply with the provisions plete performance of my dutles, and I am familiar with as registered agent as provided for in Chapter 608, F.
Registered Agent's Signature (REQUIRED)	Florida st TAMA City, Having been named as registered agent a liability company at the place designal registered agent and agree to act in this a statutes relating to the proper and compactory the obligations of my position of the proper and compactory the obligations of the proper and c	State, and Zip and to accept service of process for the above stated ling ted in this certificate, I hereby accept the appointment appacity. I further agree to comply with the provisions of the performance of my duties, and I am familiar with as registered agent as provided for in Chapter 608, F.L.
lulatur	Florida st TAMA City, City, Having been named as registered agent a liability company at the place designar registered agent and agree to act in this a statutes relating to the proper and compaccept the obligations of my position of Registered Agent.	State, and Zip and to accept service of process for the above stated linited in this certificate, I hereby accept the appointment appacity. I further agree to comply with the provisions alete performance of my duties, and I am familiar with as registered agent as provided for in Chapter 608, F.S. Signature (REQUIRED)

(1,060001598903)

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:
MGRM	RAJESH. V. PATELL 10226 GARDEN ALCOVE DRIVE TAMIA FL 33647
<u>mgfm</u>	BHAYNIKA F. PATEL 10226 GAFDEN ALCOYE DRIVE TAMPA FL 33647
	TAREC 2006.
(Use attachment if necessary)	AFILSEE, OF
ICLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days price
REQUIRED SIGNATURE:	
Signature of a memi-	octor an authorized representative of a member.
(In accordance with a	action 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
LATEJH 7	yped or printed name of signee
Filing Yess;	
\$125.00 Filing Fee for Articles of Org of Registered Agent	venication and Decimation

Page 2 of 2