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(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	re)
(Do	cument Number)	<u>.</u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HJFUEL 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:
LINDA BUTERA
(Name of Person)
HJFUEL LLC
(Firm/Company)
360 55Th AVENUE N.E.
(Address)
ST. PETERS DUR 9 FL 33703-3016 (City/State and Zip Code)
For further information concerning this matter, please call:
LINIA BUTERA at (727) 526-9905 (Name of Person) Enclosed is a check for the following amount: [Inclosed is a check for the
Enclosed is a check for the following amount:
S125.00 Filing Fee Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address Registration Section Registration Section

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
HJFUEL	LLC.
(Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1 The par Office Address.	Winning Additess.
360 55Th AVE NE	360 55 AVE N.E.
ST. PETERS BURG	ST. PETERSBURG
FUDLISH 33703	FLORIDA 33703
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	red Agent. You must designate an individual of another
I /	Sistered agent are.
LINA A	BUTERA EST S
360 557 A	VE N.E. SS (P.O. Box NOT acceptable)
ST. PETER SIBURG City, State, and	FL 33703

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..

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
LINEA BUTERA MER	360 55th AVE NT ST PETERSBURG FL 33703
Michael Scott "mbRm"	360 55Th AVE N.E. ST PETERSBURG FL 33703
	TASS S
	SSE OF THE PERSON OF THE PERSO
(Use attachment if necessary)	
(minimion is moodboar)	e of filing: 6-14-06 (OPTIONAL)

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)