

06000066228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

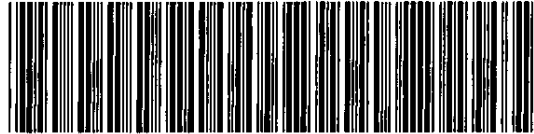
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06-06228
JR

EFFECTIVE DATE

6-13-06



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2006

HEZRON OMAWALI
12554 ANGEL LAKE DRIVE W.
JACKSONVILLE, FL 32218

SUBJECT: HEZRON REAL ESTATE DEVELOPMENT, LLC
Ref. Number: W06000027701

We have received your document for HEZRON REAL ESTATE 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 706A00041072

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2006

HEZRON OMAWALI
12554 ANGEL LAKE DRIVE W
JACKSONVILLE, FL 32218

SUBJECT: HERZON REAL ESTATE DEVELOPMENT, LLC
Ref. Number: W06000025639

Upon receipt of your letter and/or check(s) totaling \$125.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 806A00038720

2006 JUN 16 PM 12:18
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HEZRON REAL ESTATE 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:

HEZRON OMAWALI

(Name of Person)

HEZRON REAL ESTATE DEVELOPMENT, LLC

(Firm/Company)

12554 Angel Lake Drive W.

(Address)

Jacksonville , Florida 32218

(City/State and Zip Code)

2006 JUN 16 PM 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

HEZRON OMAWALI

(Name of Person)

at (904) 881-7965

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 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 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:

HEZRON REAL ESTATE DEVELOPMENT, 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:

12554 Angel Lake Drive W.
Jacksonville, Florida 32218

Mailing Address:

P.O. BOX 2034
JACKSONVILLE, FLORIDA 32203

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:

HEZRON OMAWALI
Name

12554 Angel Lake Drive W.

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

Jacksonville FL 32218

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.

Hezron Omawali
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE

6-13-06

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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:

MGRM

HEZRON OMAWALI

12554 Angel Lake Drive W

Jacksonville, Florida 32218

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 06/13/2006

(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.)

HEZRON OMAWALI

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA