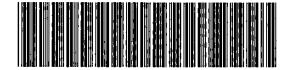
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u></u>
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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2006 SEP 25 PM 2: 23
SECRETARY OF STATE
TALL AHASSEF FLOSION

We-94192

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: Hall LM	IPC, LLC		
	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Malcolm D			
	(Name of Person)	
Hall LMPC	, LLC		
		(Firm/Company)	
1878 Brist	ol Ct.		
		(Address)	3 6
Maitland,	FL 32751		2006 SEP 25 SECRETARY I
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	SEE.FI
Malcolm D. Hall		at (407) 767-699	
(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for	or 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	Street/Courier Addres Registration Section	<u>s</u>

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:

(Must end with the	words "Limited Liability Com	pany, "Limited Company" or their abbreviation "LLC	C," or "L.C.,")	
ARTICLE II -				
The mailing ad	dress and street addres	ss of the principal office of the Limited L	iability Compan	y is:
Principal Office Address:		Mailing Address:		
1878 Bristol Court		1878 Bristol Court		
Maitland, FL 3275	1	Maitland, FL 32751		
		Registered Office, & Registered Agent its own Registered Agent. You must designate an indin.) ess of the registered agent are: Name	SEP 25 RETARY AHASSE	
	1878 Bristol Cour	rt	PH 2: OF STA	g nga Lapakan Sili. Maja gagan
		da street address (P.O. Box NOT acceptable)	PM 2: 23 OF STATE EE.FLORIDA	
	Maitland	_{FL} 32751	<u></u>	
		City, State, and Zip		
liability cor registered age statutes relat	mpany at the place desi nt and agree to act in th ing to the proper and c	ent and to accept service of process for the ignated in this certificate, I hereby accept t his capacity. I further agree to comply wit omplete performance of my duties, and I a ion as registered agent as provided for in	the appointment of th the provisions um familiar with a	as of all and

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address:

	ager		
"MGRM" = Ma	anaging Member		
MGRM		Malcolm D Hall	
		1878 Bristol Court	
		Maitland, FL 32751	
			
	•		
(Use attachmer	at if necessary)		
CLE V: Effectiv	e date, if other than the isted, the date must be date of filing.)	e date of filing: (OPTIONAL) se specific and cannot be more than five business days p	orion
CLE V: Effective of the control of t	e date, if other than the isted, the date must be date of filing.) GIGNATURE:	e specific and cannot be more than five business days p	rioi
CLE V: Effective of the control of t	e date, if other than the isted, the date must be date of filing.) GIGNATURE:	e specific and cannot be more than five business days p	rioi
CLE V: Effective of the control of t	e date, if other than the isted, the date must be date of filing.) SIGNATURE: Signature of a member (In accordance with se	er or an authorized representative of a member 25 cition 608.408(3), Florida Statutes, the execution 25 citiutes an affirmation under the penalties of perjury 25 cition 608.408(3).	rioi
CLE V: Effective of the control of t	e date, if other than the isted, the date must be date of filing.) EIGNATURE: Signature of a member of this document constitute the facts stated	er or an authorized representative of a member 25 cition 608.408(3), Florida Statutes, the execution 25 citiutes an affirmation under the penalties of perjury 25 cition 608.408(3).	rior

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)