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(Requestor's Name)	
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PICK-UP WAIT MAIL	11/20/06
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COVER LETTER

	egistration Se ivision of Con				
SURJECT	. HEG S	SALES L. L. C.			
SOBSECT	•	(Name of Limited	Liability Compa	ny)	
The enclos	ed Articles of	. f Organization and fee(s) are su	ıbmitted for filing	.	
Please retu	rn all corresp	ondence concerning this matte	r to the following:	;	
Н	orace E.	Gould			
		(1	Name of Person)	<u></u>	
HE	EG SAL	ES L. L. C.			
		(1	Firm/Company)		
P	Э ВОХ	410254			
			(Address)		
М	elbourr	ne, Florida 32941			
		(City/	State and Zip Code)	
For further	information	concerning this matter, please	call:		
Horace	E. Gou	ld	at (321	253-400	09
	(Name	of Person)	at (321) (Area Code	& Daytime To	elephone Number)
Enclosed	is a check fo	or the following amount:			
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	/	\$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	Registration Division of Clifton Boundary 2661 Exe	ourier Addression Section of Corporatiouilding cutive Center ee. Fl. 32301	ns



November 21, 2006

HORACE E. GOULD HEG SALES L.L.C. P.O. BOX 410254 MELBOURNE, FL 32941

SUBJECT: HEG SALES L.L.C. Ref. Number: W06000050987

We have received your document for HEG SALES L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6967.

Letter Number: 406A00067921

Michelle Hodges Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company	is:			
HEG SALES L. L. C.	•			
(Must end with the words "Limited Liability Company, "Li	imited Company" or their abbreviation "LLC," or	r "L.C.,")		
ARTICLE II - Address:		:::: C	!	
The mailing address and street address of the	e principal office of the Limited Liab	inty Compa	any is:	
Principal Office Address:	Mailing Address:			
865 Villa Drive	PO Box 410254			
Melbourne	Melbourne			
Florida 32940	Florida 32941-0254			
865 Villa Drive Florida street Melbourne,		SECRETARY OF STATE ALLAHASSEE FLORIDA	06 DEC 13 PM 1: 44	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the ab in this certificate, I hereby accept the c acity. I further agree to comply with the e performance of my duties, and I am fo	appointmen ne provision familiar with	t as s of all h 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:

"MGR" = Manager "MGRM" = Managing Membe	г
MGRM	Horace E. Gould 865 Villa Drive Melbourne, FL 32940
(Use attachment if necessary)	
	nan the date of filing: January 1, 2007 . (OPTIONAL) nust be specific and cannot be more than five business days prior
	must be specific and cannot be more than five business days p

of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Horace E. Gould Typed or printed name of signee

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution

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)