

LO7000056268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

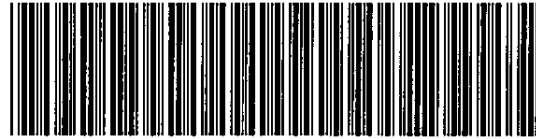
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**PRESSLY & PRESSLY, P.A.**

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J. GRIER PRESSLY, III

TELEPHONE (561) 659-4040  
FAX(561) 655-6006

May 17, 2007

**CERTIFIED MAIL, RETURN RECEIPT  
REQUESTED NO. 7004 2890 0004 3721 4968**

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

**Re: Williams' Hound Ears, LLC**

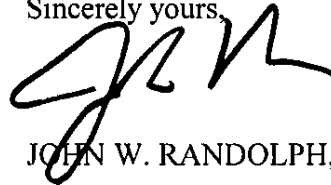
Dear Madam/Sir:

Enclosed please find an original and one copy of the Articles of Organization with reference to the above.

Also enclosed please find our check in the amount of \$125 representing payment-in-full for the filing fee of the Articles of Organization. Please file the original and return the copy to my office stamped received in the provided return envelope.

Thank you.

Sincerely yours,



JOHN W. RANDOLPH, JR.

JWRjr/msg  
enclosures

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Williams' Hound Ears, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

118 Gomez Road  
Hobe Sound, FL 33455

**Mailing Office:**


118 Gomez Road  
Hobe Sound, FL 33455

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Mansfield W. Williams  
118 Gomez Road  
Hobe Sound, FL 33455

*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.*



Mansfield W. Williams  
Registered Agent's Signature

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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, Name and Address:**

"MGR"= Manager

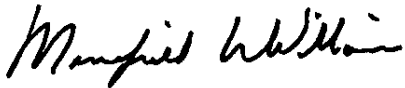
"MGRM" = Managing Member

MGRM

Mansfield W. Williams  
118 Gomez Road  
Hobe Sound, FL 33455

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



Mansfield W. Williams

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.)

Mansfield W. Williams

Typed or printed name of signee

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