

•		
(Requestor's Nam	ne)
-		
	(Address)	
	(Address)	
	•	
	City/State/Zip/Ph	one #)
`	On you are in	one #)
PICK-UP	☐ WAIT	MAIL
	Business Entity N	Jame)
(Dusiness Entity i	vaille)
(Document Numb	er)
Certified Copies	Certifica	tes of Status
Special Instructions	to Filing Officer:	
!		:
		:
· · · · · · · · · · · · · · · · · · ·		

Office Use Only



900103744539

06/04/07--01014--014 **125.00

Depot Noon 21-71 07 JUN 15 PM 2: C

SECRETARY OF STATE
OIVISION OF COMMON ARBO

COVER LETTER

TO: Registration Section Division of Corporation	ns		
SUBJECT: De	Name of Limite	d Liability Company)	
The enclosed Articles of Organ	ization and fee(s) are s	submitted for filing	
Please return all correspondence	``	_	
	Don Hu	Feling (Name of Person)	
		(Name of Person)	
		(Firm/Company)	
2006	Ocean	Shere Bluo	1#8
0,	mend &	Sheve Bluo (Address) Beach, Fl. (/State and Zip Code)	32176
	(City	//State and Zip Code)	
For further information concern	ing this matter, please	call:	
Name of Person	utchins	at (<u>386</u>) <u>68/</u> (Area Code & Daytime To	9693 elephone Number)
Enclosed is a check for the f	ollowing amount:		
\$125.00 Filing Fee \$\bigcup\$ Cert	130.00 Filing Fee & ficate 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)
	ing Address	Street/Courier Addres	<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	::	
Don Hutch	lins UC	
(Must end with the words "Limited Liability Company, "Lim	ited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Compar	ıy is:
Principal Office Address:	Mailing Address:	
2006 Ocean Share Blod	Samé	
2006 Ocean Shore Block # 8 Ormand Beach Ff 321	76	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)		0
The name and the Florida street address of the	registered agent are:	NIS SE
Don Hu	-	CRET
Name	e	무중
2006 Oce	an shore B/Vd.#8	: 39 : 39
Florida street a	ddress (P.O. Box NOT acceptable) LFL 52176 and Zip	STATION STATION
•	accept service of process for the above stated lin	nited
	this certificate, I hereby accept the appointment	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

Title: "MGR" = Mana "MGRM" = Ma		Name and Address:
		
		
(Use attachment	t if necessary)	
CLE V: Effective	date, if other than the	date of filing: (OPTIONA
CLE V: Effective	date, if other than the	date of filing: (OPTIONA e specific and cannot be more than five business day
CLE V: Effective	date, if other than the	
LE V: Effective	date, if other than the sted, the date must be late of filing.)	
CLE V: Effective ffective date is list days after the d	date, if other than the sted, the date must be late of filing.)	
CLE V: Effective ffective date is list days after the d	date, if other than the sted, the date must be late of filing.) IGNATURE:	
CLE V: Effective effective date is list of days after the d	date, if other than the sted, the date must be late of filing.) IGNATURE: Signature of a member of this document const that the facts stated here.	e specific and cannot be more than five business day er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury herein are true.)
CLE V: Effective ffective date is list days after the d	date, if other than the sted, the date must be late of filing.) IGNATURE: Signature of a member of this document const that the facts stated here.	e specific and cannot be more than five business day er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)