

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H070002680173)))



HOTODOGRADITAKACA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HUBCO

Account Number : 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

Resubmit 10/31/07

MECEIVED

77 OCT 31 PH 3: 16

SECRETARY OF STATE

LORIDA/FOREIGN LIMITED LIABILITY CO.

Kelly Huffman LLC

Certificate of Status	1
Certified Copy	0
Page Count	02/03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

OZ DET 31 AMIL: 21.

H07000268017

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Principal Office Address:	Mailing Address:		
	#440 I/-II To!		
5240 Kelly Drive	5240 Kelly Drive		
Haverhill, FL 33415	Hayerhill, FL 33415		
		07	DIVISION OF SAME
	·	003	Ξ
ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature The name and Florida street address of the registered agent are:		07 OCT 31	<u>(</u>
The lighter and 1 to the attent admiss	Kelly Huffman		(T)
•	Namo	AH II: 24	
	5240 Kelly Dr.	: 24	T-ATU
	(P.O. Box or Mail Drop Box NOT Acceptable)	Ť	***
	Haverhill.FL 33415		
	(City / State / Zip)		
at the place designated in this cert	agent and to accept service of process for the above stated limited liabilificate, I hereby accept the appointment as registered agent and agree to with the provisions of all statutes relating to the proper and complete p	o act in this	S

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

MGRM

Gary McKee - 3762 Victoria Dr., West Palm Beach, FL 33406

MGRM

Alden Rease - 1375 10th St., West Palm Beach, FL 33401

(Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member of 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.)

Gary McKee

Typed or printed name of signee