# L07000114257

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(Requestor's Name)	
(Address)	<u> </u>
(Address)	
(City/State/Zip/Phone	e #)
PICK-UP WAIT	MAIL
(Business Entity Nam	ne)
(Document Number)	
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	

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Effective Date 11 06 07

SECRETARY OF STATE DIVISION OF CORPORATIONS

07 NOV -9 PM 2: 04

# **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJE	ECT. Hilgendorf Construction, LLC				
SUBJE	(Name of Limited Lial		iny)	<del></del> _	
	16 ()	. 1 C Ellin -	_		
	nclosed Articles of Organization and fee(s) are submit				
Please	e return all correspondence concerning this matter to the	he following	;;		
	Chris Hilgendorf			· .	
	(Name	of Person)			
	Hilgendorf Construction, LLC				
	(Firm/	Company)			
	4318 Timor Place				<u>a</u> 926
	(Ac	ddress)			T NO
	Sarasota, FL 34241				OF OF RE
	(City/State	and Zip Code	e)		ORP
For fu	urther information concerning this matter, please call:				OT NOV -9 PH 2: 04
Chri	ris Hilgendorf	941	) 650-5354 le & Daytime Tele	4	+ 5
	(Name of Person)	(Area Cod	le & Daytime Tele	phone Number)	
Enclo	osed is a check for the following amount:				
<b>□</b> \$125	Certificate of Status C	155.00 Filin Certified Co additional cop		\$160.00 Filing For Certificate of Sta Certified Copy (additional copy is e	tus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Ex	courier Address toon Section of Corporations Building ecutive Center Cosee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Hilgendorf	Construction, LLC					
	(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II	- Address:	•				
		of the principal office of the Limite	l Liability Comp	any is:		
Principal Office Address:		Mailing Address:	Effective D	ffective Date 11 06 0		
4318 Timor Place		4318 Timor Place		11 (00)0)		
0 1 51 040						
ARTICLE II	I - Registered Agent, Re	gistered Office, & Registered Age	ent's Signature:			
ARTICLE II: (The Limited Liabi business entity wi	I - Registered Agent, Relity Company cannot serve as its of the an active Florida registration.)		ent's Signature: Individual or another	SECRE DIVISION		
ARTICLE II: (The Limited Liabi business entity wi	I - Registered Agent, Registre Agent, Registre Company cannot serve as its of the an active Florida registration.)  the Florida street address	gistered Office, & Registered Age own Registered Agent. You must designate an of the registered agent are:	individual or another	SECRETARY DIVISION OF C		
ARTICLE II: (The Limited Liabi business entity wi	I - Registered Agent, Relity Company cannot serve as its of the an active Florida registration.)	gistered Office, & Registered Age own Registered Agent. You must designate an of the registered agent are:	individual or another NOV - 9 PM	FILED CRETARY OI ION OF CORF		
ARTICLE II: (The Limited Liabi business entity wi	I - Registered Agent, Registre Agent, Registre Company cannot serve as its of the an active Florida registration.)  the Florida street address	gistered Office, & Registered Age own Registered Agent. You must designate an of the registered agent are:  If  Name	individual or another NOV - 9 PM	FILED CRETARY OI ION OF CORF		
ARTICLE II: (The Limited Liabi business entity wi	I - Registered Agent, Registered Agent, Registered Agent, Registration of the Agent active Florida registration.)  the Florida street address  Chris Hilgendo  4318 Timor Pla	gistered Office, & Registered Age own Registered Agent. You must designate an of the registered agent are:  If  Name	individual or another 7 NOV -9 PM 2: (	FILED CRETARY OI ION OF CORF		
ARTICLE II: (The Limited Liabi business entity wi	I - Registered Agent, Registered Agent, Registered Agent, Registration of the Agent active Florida registration.)  the Florida street address  Chris Hilgendo  4318 Timor Pla	gistered Office, & Registered Age own Registered Agent. You must designate an of the registered agent are:  off Name  acceptable street address (P.O. Box NOT acceptable)	individual or another NOV - 9 PM	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		

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..

Registered Agent's Signature (REQUIRED)

(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:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	Chris Hilgendorf	
	4318 Timor Place	
	Sarasota, FL 34241	
		NOV SIDNET
		o call
		7 399
<u>_</u>		PR PRINT
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(T)		01

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: November 6, 2007. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:** 

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.)

Chris Hilgendorf

Typed or printed name of signee

### 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)