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(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 JAN 14 PM 2:06

**Edlock** JAN 16 2008

**Peter J. Brevorka, P.C.**

**Attorney at Law  
1515 West Cornwallis Drive  
Suite 101  
Greensboro, NC 27408  
Telephone: (336) 271-4014  
Facsimile: (336) 271-8448**

January 4, 2008

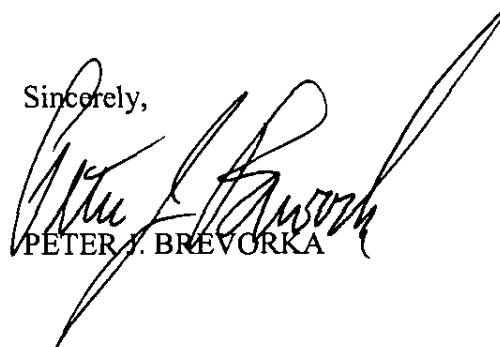
Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Dear Ladies and Gentleman,

Enclosed are the Articles of Organization for Hunter Lavinder Antiques, LLC, along with a check for \$130 to cover the filing and Certificate of Status Fees.

Please return the Certificate of Status to my office in the enclosed self-addressed stamped envelope. Feel free to contact me if you have any questions.

Sincerely,



PETER J. BREVORKA

Enclosure

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E-mail Addresses:

Peter J. Brevorka, Esq.: [brevorka@bellsouth.net](mailto:brevorka@bellsouth.net)  
Admitted to Practice: North Carolina, Florida & New York

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HUNTER LAVINDER ANTIQUES, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HUNTER LAVINDER

(Name of Person)

HUNTER LAVINDER ANTIQUES, LLC

(Firm/Company)

5505 S. DIXIE HWY, SUITE 1

(Address)

WEST PALM BEACH, FL, 33405

(City/State and Zip Code)

For further information concerning this matter, please call:

Hunter Lavinder

(Name of Person)

at ( 404 ) 308-3007

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☒ \$130.00 Filing Fee & Certificate 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)

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

**Street/Courier Address**  
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:

HUNTER LAVINDER ANTIQUES, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:**

5505 S. DIXIE HWY, SUITE 1  
WEST PALM BEACH, FL, 33405

**Mailing Address:**

5505 S. DIXIE HWY, SUITE 1  
WEST PALM BEACH, FL, 33405

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Hunter Lavinder

Name


5505 S. DIXIE HWY, SUITE 1

Florida street address (P.O. Box NOT acceptable)

WEST PALM BEACH, FL 33405

City, State, and Zip

*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

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DIVISION OF CORPORATIONS  
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**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

**Name and Address:**

MGR

Hunter Lavinder

5505 S. DIXIE HWY, SUITE 1

WEST PALM BEACH, FL, 33405

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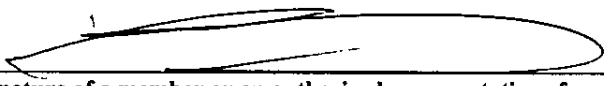
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (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.)

**Hunter Lavinder**

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)**