

L 08000055516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

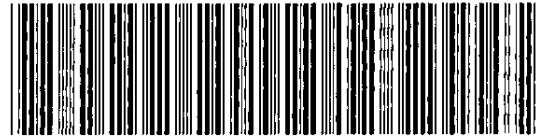
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
08 JUN -5 AM 10:46
STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUN - 5 2008

EXAMINER



UCC FILING & SEARCH SERVICES, INC.
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 Tallahassee, Florida 32309
 (850) 681-6528

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June 5, 2008

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Haden Reid, LLC

Filing Evidence

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

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 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

ARTICLES OF ORGANIZATION

**ARTICLES OF ORGANIZATION FOR
HADEN REID, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I
NAME**

The name of the Limited Liability Company is: HADEN REID, LLC

**ARTICLE II
ADDRESS**

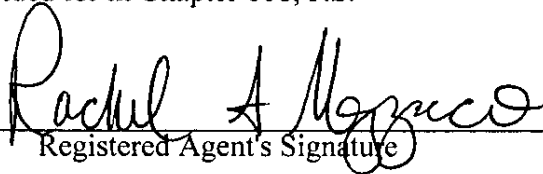
The mailing address and street address of the principal office of the Limited Liability Company is: 10319 Waters Edge Court, Weeki Wachee, FL 34613.

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE**

The name and address of the registered agent and office is:

Rachel A. Mazzuco
10319 Waters Edge Court
Weeki Wachee, FL 34613

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 provided for in Chapter 608, F.S.


Registered Agent's Signature

**ARTICLE IV
MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. The name(s) and address(es) of the managing member(s) is/are:

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Rachel A. Mazzuco
10319 Waters Edge Court
Weeki Wachee, FL 34613

Manager-Member

**ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS**

The members shall have the right to admit additional members upon the written consent of all members.

**ARTICLE VI
MEMBERS RIGHTS TO CONTINUE BUSINESS**

The members shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company by executing a written consent to continue to do such business.

**ARTICLE VI
EFFECTIVE DATE AND DURATION**

The effective date of the Limited Liability Company shall be upon filing of these Articles with the Secretary of State of Florida and the period of duration for the Limited Liability Company shall be: Perpetual.

IN WITNESS WHEREOF, I(WE), the undersigned member(s), have hereunto set our hands and seals this 4th day of June, 2008, for the purpose of forming this limited liability company under the laws of the State of Florida, and we hereby make and file in the Office of the Secretary of the State of Florida, this Articles of Organization, and 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.

WITNESSES:

[Signature]

[Signature]

[Signature]
Rachel A. Mazzuco