

L08000055996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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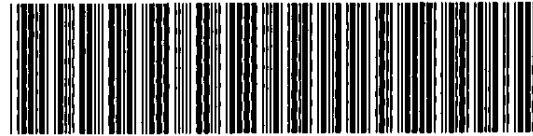
(Business Entity Name)

(Document Number)

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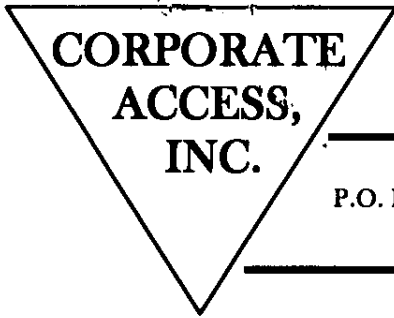
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EXAMINER



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## WALK IN

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TALLAHASSEE, FLORIDA

1.

Hickory Bay, LLC  
(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

HICKORY BAY, LLC

**ARTICLE II - Address**

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

428 Main Street  
Windermere, Florida 34786

**ARTICLE III - Registered Agent and Office and Registered Agent's Signature**

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

Corporation Company of Orlando  
300 S. Orange Avenue – Suite 1000 (DJC)  
Orlando, Florida 32801

*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, Florida Statutes.*

**CORPORATION COMPANY OF ORLANDO**

By: \_\_\_\_\_

(Registered Agent's Signature)

Robert A. Savill, Vice President

\_\_\_\_\_  
Signature of \_\_\_\_\_

authorized representative

Donald J. Curotto

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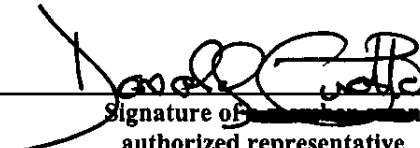
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By: 

(Registered Agent's Signature)

Robert A. Savill, Vice President

  
Signature of \_\_\_\_\_  
authorized representative  
Donald J. Curotto