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T. CLINE
AUG 1 8 2008
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2008

KENNETH AUSTIN 4322 BUTLER RD TUPELO, MS 38801

SUBJECT: HOPE PROPERTIES, LLC

Ref. Number: W08000038631

We have received your document for HOPE PROPERTIES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as of it is not distinguishable from the name of an existing entity. Section 608.4065 Florida Statutes, was amended effective July 1, 2007, to require the name of limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L99000002689.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 308A00046361

COVER LETTER

Division of C SUBJECT: Hope		ies, LLC	
SUBJECT:		Liability Company)	
The enclosed Articles of	of Organization and fee(s) are sul	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
Kenneth L	Austin		
	(N	ame of Person)	
	(F	ітт/Сотралу)	PS B
4322 Butl	er Rd.		LARE AUG
		(Address)	S 2 5
Tupelo, M	IS 38801		BUD AUG 15 PH 3: 02 SECRETARY OF STATE ALLAHASSEE. TLORID
<u> </u>		itate and Zip Code)	
For further information	concerning this matter, please co	alj:	O2
Kenneth L. Au	stin .	662 ₃ 871-1559	
(Nam	e of Person)	(Area Code & Daytime Telepho	ne Number)
Enclosed is a check f	or the following amount:		
\$125,00 Filing Fee	S130.00 Filing Fce & Certificate of Status	Certified Copy C (additional copy is enclosed) C	60.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	le

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Comp	
KLMH Properti	ies, LLC
Hope Properties, LLČ	,
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4322 Butler Rd.	4322 Butler Rd.
Tupelo, MS 38801	Tupelo, MS 38801
	(C) College
	gistered Office, & Registered Agent's Signature: 🕠 💮
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual or another
	The second secon
The name and the Florida street address	of the registered agent are:
Agents & Corpo	orations, Inc.
	Name
300 Fifth Ave. S	South, Suite 101-330
	street address (P.O. Box NOT acceptable)
Naples,	FL 34102
	, State, and Zip
Having been named as registered agent	and to accept service of process for the above stated limited
	nted in this certificate, I hereby accept the appointment as
	capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and
	as registered agent as provided for in Chapter 608, F.S
	· · · · · · · · · · · · · · · · · · ·

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member		
MGR	Kenneth L. Austin	
	4322 Butler Rd.	
	Tupelo, MS 38801	
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		<u> </u>
(Use attachment if necessary)		12 C
(Ose attachment if necessary)		
LE V: Effective date, if other than th	e date of filing:	OPTIONA
Tasting data is listed the data would	be specific and cannot be more than five bu	

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.)

Kenneth L. Austin, Manager, Austin Family Holdings, LLC

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)