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SIVISION OF CORPORATIONS

OB NOV 19 PM 1: L5

J. BRYAN
NOV 2 0 2008

EXAMINER

COVER LETTER

TO: Registration Division of C			
SUBJECT: HBL M	Kanapaha LLC		
Sobject.		ed Liability Company)	_
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
Morton Fi	shman		
	. ((Name of Person)	
HBL Kana	apaha LLC		
		(Firm/Company)	
8330 Curi	rency Drive, Unit 1		8
		(Address)	3
Riviera Be	each, FL 33404		10 C
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	OE NOV 19 PH 1: 45
Morton Fishma	an	at (561) 881-5300	,
(Name	e of Person)	(Area Code & Daytime Telephone Number)	-
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy (additional copy is enclosed) Certificate of St Certified Copy (additional copy is	atus &
	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:

HBL Kanapaha LLC (Must end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")	<u> </u>	
ARTICLE II - Address:	•		
The mailing address and street address o	f the principal office of the Limited Liabi	lity Company	is
Principal Office Address:	Mailing Address:		
8330 Currency Drive, Unit 1	8330 Ситепсу Drive, Unit 1		
Riviera Beach, FL 33404	Riviera Beach, FL 33404		
ADTICLE TO THE PARTY OF THE PAR			
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	ristered Office, & Registered Agent's Si wn Registered Agent. You must designate an individual of the registered agent are:	or another	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual of the registered agent are:	or another OIVISION OF	***
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	wn Registered Agent. You must designate an individual of the registered agent are:	OF NOV 19	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	wn Registered Agent. You must designate an individual of the registered agent are: Name	OF SOLUTION OF CORPOR	
(The Limited Liability Company cannot serve as its of business entity with an active Florida registration.) The name and the Florida street address of Morton Fishman 8330 Currency	wn Registered Agent. You must designate an individual of the registered agent are: Name	OF SOLUTION OF CORPOR	
(The Limited Liability Company cannot serve as its of business entity with an active Florida registration.) The name and the Florida street address of Morton Fishman 8330 Currency	wn Registered Agent. You must designate an individual of the registered agent are: Name Drive, Unit 1 treet address (P.O. Box NOT acceptable)	OF NOV 19	

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)

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

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

MGRM	Morton Fishman
	8330 Currency Drive, Unit 1
	Riviera Beach, FL 33404
•	
•	
	To the second se
	
Use attachment if necessary)	
LE V: Effective date, if other that	un the date of filing: (OPTION
	ust be specific and cannot be more than five business da
says after the date of ming.	

Morton Fishman

that the facts stated herein are true.)

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

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)