

L09000020883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

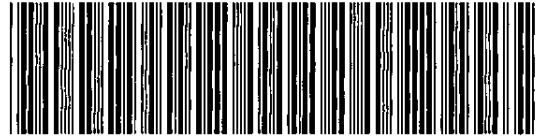
(Business Entity Name)

(Document Number)

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

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03/04/09--01001--007 \*\*155.00

B. KOHR  
MAR - 4 2009  
EXAMINER

RECEIVED  
09 MAR - 3 PM 4:33  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
09 MAR - 3 AM 8:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Advanced Incorporating Service, Inc.

1010 San Luis Road  
P.O. Box 20396  
Tallahassee, FL 32316

Phone: 850-575-2723  
Fax: 850-575-2724  
Email: [orders@advancedincorporating.com](mailto:orders@advancedincorporating.com)  
Website: [www.advancedincorporating.com](http://www.advancedincorporating.com)

NAME OF ENTITY <u>HTBA, LLC</u>	<div>09 MAR - 3 AM 8:15 FILED TALLAHASSEE, FL 32316 FOR OFFICE USE ONLY</div>
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## PICK ONE:

☒ CERTIFIED COPY ☐ PHOTOCOPY

## FILING:

☐ CORPORATION ☒ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP  
☐ FICTITIOUS NAME ☐ SERVICEMARK/TRADEMARK ☐ AMENDMENT  
☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN  
☐ OTHER \_\_\_\_\_

## RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY  
Of \_\_\_\_\_

## APOSTILLE/CERTIFICATION REQUEST:

Country \_\_\_\_\_

Amount of Documents \_\_\_\_\_

DATE 3/3/09 TIME 4:15

Notes: \_\_\_\_\_

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

**ARTICLE I - NAME**

The name of the Limited Liability Company is: **HTBA, LLC**

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: **62 Central Court, Tarpon Springs, Florida 34689**

**ARTICLE III - DURATION**

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Operating Agreement.**

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by the members. The names and addresses of the managing members are:

**Paul A. Wilcock  
62 Central Court  
Tarpon Springs, Florida 34689**

**Vivienne B. Wilcock  
62 Central Court  
Tarpon Springs, Florida 34689**

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

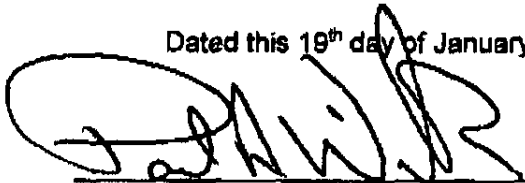
The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: **Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.**

**ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the limited liability company 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 shall be: **Only with the consent of all the remaining Members.**

**IN WITNESS WHEREOF**, these Articles of Organization have been signed, as Managing Member, by: **Paul A. Wilcock and Vivienne B. Wilcock.**

Dated this 19<sup>th</sup> day of January, 2009.

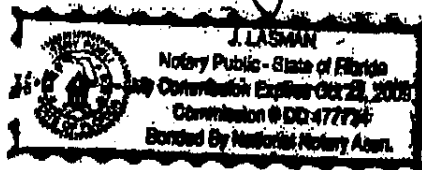
  
**Paul A. Wilcock**

  
**Vivienne B. Wilcock**

**Managing Member**  
**STATE OF FLORIDA**  
**COUNTY OF HILLSBOROUGH**

The foregoing instrument was acknowledged before me this 19<sup>th</sup> day of January, 2009, by **Paul A. Wilcok** and **Vivienne B. Wilcock**, who have produced Florida Driver Licenses as identification.

  
\_\_\_\_\_  
Jeffrey M. Lasman, Notary Public



**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: HTBA, LLC
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire  
LASMAN LAW FIRM, P.A.  
8162 Delancey Station Street, Suite 205  
Riverview, Florida 33578**

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.

  
\_\_\_\_\_  
Jeffrey M. Lasman

January 19, 2009  
(Date)