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M. THOMAS

MAR 2 4 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: /- Artley Associates (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Scott Hartley (Name of Person)
HAYTIEY ASSOCIATES LLC (Firm/Company)
17000 WOrth Bay Road #814 (Address)
Sunny Isles Florida 33160 (City/State and Zip Code)
For further information concerning this matter, please call:
SCOTT HAYLLEY at (336) 215-3643 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sum_{125.00}\$ \text{Filing Fee & Certificate of Status} \text{ Status & Certified Copy (additional copy is enclosed)} \text{ Certified Copy (additional copy is enclosed)} Certified Copy (a
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 12, 2009

SCOTT HARTLEY 1700 NORTH BAY ROAD #814 SUNNY ISLES, FL 33160

SUBJECT: HARTLEY ASSOCIATES LLC

Ref. Number: W09000011779

We have received your document for HARTLEY ASSOCIATES LLC and your check(s) totaling \$155.00. 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, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a 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 L04000086282, F00000004585.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Division of Corporations - P.O. ROY 6327 - Tallahassaa, Florida 32314

Letter Number: 509A00008504

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE I - Name:

The name of the Limited Liability Company is:

\mathscr{G}	•
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
	26.00
Principal Office Address:	Mailing Address:
1710 NW Dand & Bay3	17000 N Bay Road #814 Sunny Isles fl 33160
rumpino Deach +1 33000	Sunny 15185 \$1 33160
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Chris Zob	
Name	_
M.W. 22 Florida street addr	ress (P.O. Box NOT acceptable)
Omom Boat	2201.0
POLITION DE LECCON	nd Zip
Having been named as registered agent and to a	ccept 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..

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "MGR" = Manage "MGRM" = Mana		Name and Address:
MGR	_	SCOTT HArtley 17000 NI Bay Road #814 Sunny Isles fl 33160
MGR	_	KATHERINE HARHEY 17000 N Bay Road # 814 Sunny Isles fl 33160
MGR	_	Chris Zobeck 2311 South Cypress bent D Aft 219, Pompano Beach 220
· 11 #	_	
Use attachment if	necessary)	
LE V: Effective da fective date is liste	ate, if other than t	
LE V: Effective da fective date is liste days after the dat REQUIRED SIG	nte, if other than tod, the date must e of filing.) NATURE:	the date of filing: (OPTION to be specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and cannot be more than five business defined by the specific and the specific
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LE V: Effective da fective date is listed days after the date date is listed days after the days	nte, if other than tod, the date must be of filing.) NATURE: Signature of a men of this document country that the facts state	aber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury