

L09000043390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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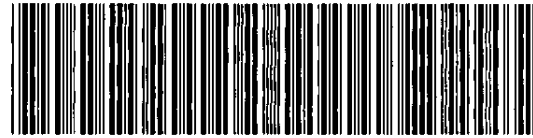
(Business Entity Name)

(Document Number)

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T. HAMPTON

MAY - 5 2009

EXAMINER

**CHRISTOPHER P. KELLEY, P.A.**

ATTORNEY AT LAW  
11098 BISCAYNE BOULEVARD  
SUITE 205  
MIAMI, FLORIDA 33161

TELEPHONE (305) 893-6004  
FACSIMILE (305) 893-7666

EMAIL ADDRESS  
CPKLAW@BELLSOUTH.NET

May 1, 2009

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: HAWKS NEST VILLAGE LLC  
(Proposed Limited Liability Company name)

Dear Sir or Madam:

Enclosed is one (1) original and one (1) copy of Articles of Organization for **HAWKS NEST VILLAGE LLC**, with my check in the amount of **\$160.00** for filing same, including:

\$100.00	Filing fee for Articles of Organization and Affidavit.
\$ 25.00	Designation of Registered Agent
\$ 5.00	Certificate of Status
\$ 30.00	Certified copy of Articles

I understand a letter of acknowledgment will be issued free of charge.

Very truly yours,



CHRISTOPHER P. KELLEY

CPK:rd  
Enclosures

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

**ARTICLE I  
NAME**

The name of the Limited Liability Company is:

**HAWKS NEST VILLAGE LLC**

**ARTICLE II  
ADDRESS**

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

The mailing address is: 1000 Quayside Terrace, #1406  
Miami, FL 33138

The principal office address is: 1000 Quayside Terrace, #1406  
Miami, FL 33138

**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE,  
& REGISTERED AGENT'S SIGNATURE**

The name and the Florida address of the Registered Agent are:

**CHRISTOPHER P. KELLEY**  
11098 Biscayne Boulevard, Suite 205  
Miami, Florida 33161

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

ARTICLE IV  
MANAGER(S) OR MANAGING MEMBER(S)

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

CHRISTINE CANTON  
1000 Quayside Terrace, #1406  
Miami, FL 33138

MGRM

CONSTANCE POSTAL  
446 Parkwoods Avenue  
St. Louis, MO 63122

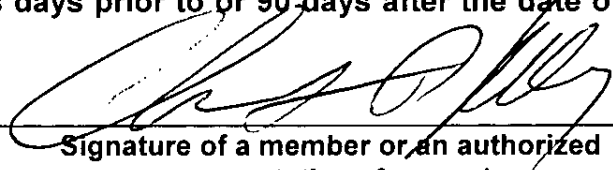
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ARTICLE V  
EFFECTIVE DATE  
(Optional)

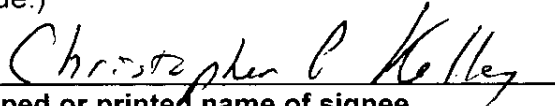
Effective date, if other than the date of filing: \_\_\_\_\_

(If an effective date is listed, the date must be specific and cannot be more than five [5] business days prior to or 90 days after the date of filing.)

**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 are true.)

  
Typed or printed name of signee