Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000144302 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

Account Name

: FOWLER WHITE BURNETT P.A.

Account Number: 071250001512

: (305)789-9200

Fax Number

: (305)789-9201

FLORIDA/FOREIGN LIMITED LIABILITY CO.

HOLLERAN ASSOCIATES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

S. HAWKES

Electronic Filing Menu

Corporate Filing Menu

Help

09 JUN 16 D SIGNATURE MY 5: 47

Audit No. H 09000144302 3

ARTICLES OF ORGANIZATION

OF

HOLLERAN ASSOCIATES, LLC

ARTICLE I

The name of the limited liability company formed hereby is **HOLLERAN ASSOCIATES**, **LLC** (the "Limited Liability Company").

ARTICLE II

The duration of the Limited Liability Company shall be perpetual.

ARTICLE III

The principal office and mailing address of the Limited Liability Company shall be as follows:

4254 S.E. Fairway East Stuart, Florida 34997

ARTICLE IV

The Registered Agent of the Limited Liability Company and his street address in the State of Florida are as follows:

Howard W. Gordon, Esq. 1395 Brickell Avenue, 14th Floor Miami, Florida 33131 Audit No. H09000144302 3

	<u>ARTICLE V</u>		00
	'East	mon .	the
STATE OF FLORIDA) COUNTY OF MIAMI-DADE)	·		
Before me personally appeared How Member, who is personally known to member as identification, to be the personal line witness whereof I have hereunto see the personal line witness whereof I have hereunto see the personal line witness whereof I have hereunto see the personal line witness whereof I have hereunto see the personal line witness whereof I have hereunto see the personal line witness whereof I have hereunto see the personal line witness whereof I have hereunto see the personal line witness whereof I have hereunto see the personal line witness where	e, or □ who produced on who executed the foreg	oing Articles of Organizat	
Expires: OCT. 18, 2009	Notary Public Print Name:	1000 D. Rod MAN 10/18/2009	

Audit No. H 09000144302 3

Audit No. H 09000144302 3

CERTIFICATE OF DESIGNATION OF RESIDENT AGENT AND ACCEPTANCE OF DESIGNATION

OS UN SUSSES Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement

- 1. The name of the limited liability company is HOLLERAN ASSOCIATES, LLC.
- 2. The name and address of the Registered Agent and Office is:

in designating its Registered Office and Registered Agent in the State of Florida:

Howard W. Gordon, Esq. 1395 Brickell Avenue, 14th Floor Miami, Florida 33131

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the 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 am familiar with and accept the obligations of my position as Registered Agent.

Howard W. Gordon, Registered Agent

HOLLERAN ASSOCIATES, LLC

Howard W. Gordon.

as Authorized Representative

of the Member

Audit No. H09000144302 3

[jdr] W:\48956\ARTORG76.JDR{6/16/9-13:41}