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(Requestor's Name)
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PICK-UP WAIT MAIL
6
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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G. MCLEOD

JUN 24 2009

EXAMINER



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SECRETARY OF A SECRET

30, 1882



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2009

RANDY SWEERS 450 EAST COPANS ROAD POMPANO BEACH, FL 33064

SUBJECT: HAZZARD, LLC Ref. Number: W09000012825

We have received your document for HAZZARD, LLC and your check(s) totaling \$160.00. 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.

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) 245-6851.

Gina McLeod Regulatory Specialist II

Letter Number: 809A00009223

COVER LETTER

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TO:	Registration Secti Division of Corpo						
SUBJ	ECT:		DUŁ	KES 01, LLC			
		Name of Limi	ted Liab	ility Company			
The en	closed Articles of Or	ganization and fee(s) are	submitte	ed for filing.			
Please	return all correspond	ence concerning this mat	tter to the	e following:			
		F		Sweers			
			Name of	f Person			
			Firm/C	ompany			
		450 E		pans Road			
	Address						
		 		ach, FL 33064 nd Zip Code			
		E-mail address: (to be used	for future	annual report notification	1)		
For fu	rther information cond	erning this matter, pleas	e call:				
	Kristy F		_ at (305) Area Code & Daytime 7	720-5814 Telephone Number		
Enclo	sed is a check for th	e following amount:					
/ \$125		\$130.00 Filing Fee & Certificate of Status	Ce Ce	55.00 Filing Fee & rtified Copy ditional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	R D	failing Address egistration Section livision of Corporations O. Box 6327		Street/Courier Addr Registration Section Division of Corporati Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Dukes ØLLLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is

ARTICLE I - Name:

rincipal Office Address:	Mailing Address:		
3800 Oaks Clubhouse Drive #104	450 East Copans Road		
Pompano Beach, FL 33069	Pompano Beach, FL 33064		
	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another		
The name and the Florida street address	of the registered agent are:	•	

FASTBOATS. Com, Toc.

Name

450 East Copans Road

Florida street address (P.O. Box NOT acceptable)

Pompano Beach, FL 33064

City. State, and Zip

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)

(CONTINUED)
Page 1 of 2

<u>l'itle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
IGRM	DANILO ZAMPALONI
	3800 Oaks Clubhouse Drive #104
	Pompano Beach, FL 33069

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>Date of Filing</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five 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 herein are true.)

Dando Zampaloni
Typed or printed name of signee

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)