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Certified Copies Ce	ertificates of Status <u> </u>	
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2009 AUG 10 AM 10: 21 SECRETARY OF STATE

M. THOMAS

AUG 1 3 2009

**EXAMINER** 

# **COVER LETTER**

TO: Registration Division of C				
SUBJECT.	HALVORSI	EN HOLDINGS, LI	LC	
Name of Limited Liability Company				
The enclosed Articles	of Organization and fee(s) are sub	omitted for filing.		
Please return all corre	spondence concerning this matter	to the following:		
		B. Zoberman, Esq.		
	Na	ame of Person		
	BUCKINGHAM, DOOI		SHS, LLP	
	Fi	rm/Company		
	5355 TOWN CEN	ITER ROAD, SUITE	900	
		Address		
	BOCA R	ATON, FL 33486		
		tate and Zip Code		
	SZOBERMA	AN@BDBLAW.COM		
	E-mail address: (to be used for	future annual report notification	SEC SEC	
For further information	n concerning this matter, please ca	all:	SECRETARY DF STATE LLAHASSEE, FLORID, 241-0414 Telephone Number	-
Solomo	n B. Zoberman a	<sub>t (</sub> 561 <sub>)</sub>	241-0414 MR 0	Ţ
Nam	e of Person	Area Code & Daytime	Telephone Number	
Enclosed is a check	for the following amount:		IO: 21 TATE ORID,	C
<b>√</b> \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addresses Registration Section Division of Corporation Building 2661 Executive Centrallahassee, FL 3230	ions er Circle	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
HALVORSEN HOLDINGS, LLC (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")				
ARTICLE II - Ad The mailing addres		incipal office of the Limited Liability Com	pany is:	
Principal Office A	ddress:	Mailing Address:		
33 SE 4TH STRE SUITE 100	· · · · · · · · · · · · · · · · · · ·	33 SE 4TH STREET SUITE 100		
BOCA RATON, FL 33432  BOCA RATON, FL 33432  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another				
business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  BDB Agent Co.  Name  5355 Town Center Road, Suite 900  Florida street address (P.O. Box NOT acceptable)  BOCA RATON 33486				
	BDB Agent Co.			
	Name Name		2 L	
	5355 Town Center Road, Suite 900		m	
	Florida street address (P.O. Box NOT acceptable)		G	
	BOOK 11014, 30400 FL			
	City, State, ar	ıd Zip		
liability compar registered agent an statutes relating t	ny at the place designated in th nd agree to act in this capacity to the proper and complete per	accept service of process for the above stated his certificate, I hereby accept the appointme of I further agree to comply with the provision of a familiar witters and I am familiar wittered agent as provided for in Chapter 608, I	nt as ns of all th and	

BDB Agent Co.

, Assistant Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

### Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	HH MANAGER, INC. 33 SE 4TH STREET, SUITE 100 BOCA RATON, FL 33432
	<b>P</b> o ~
(Use attachment if necessary)	ECRE LLAH
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)  REQUIRED SIGNATURE:	e of filing:
Signature of a member or	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herein	609.408(3), Florida Statutes, the execution affirmation under the penalties of perjury are true.)
	REY T. HALVORSEN
Filing Fees:	or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)