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EXAMINER

LEWIS RICE

FINGERSH 1010 Walnut - Suite 500 Kansas City, Missouri 64106 t: 816-421-2500 f: 816-472-2500



September 28, 2009

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

RE: HCI Bridge Harbor, LLC and HCI Mariner, LLC

Dear Sir or Madam:

Enclosed, for filing, please find an original and one photocopy of Articles of Organization for Florida Limited Liability Company, together with Registered Agent Acceptance and Cover Letter for HCI Bridge Harbor, LLC and for HCI Mariner, LLC, along with checks for the filing fees.

Once each limited liability company's articles have been filed, please provide us with a copy of each limited liability company's filing evidence for our records.

Thank you for your assistance and please do not hesitate to call if you have any question or comment.

Very truly yours,

LEWIS, RICE & FINGERSH, L.C.

Sharon Stiles,

Legal Assistant

/encls.

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COVER LETTER

10:	Registration		_
	Division of Co	orporations	
	TOID	midea Hambam IIC	
SUBJ	ECT: HUL B	ridge Harbor, LLC	ted Liability Company
		Name of Limi	ted Liability Company
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.
Please	return all corresp	oondence concerning this ma	tter to the following:
	Sharon	Stiles, Legal Assis	tant
			Name of Person
	Lewis	Rice & Fingersh	
,	Dewro, I	aree a rangersu	Firm/Company
		•	
	1010 Wal	lnut, Suite 500	
			Address
	Kansas (City, Missouri 6410	6
		Ci	ty/State and Zip Code
	skstiles	@lrf-kc.com	
•		E-mail address: (to be used	for future annual report notification)
For fur	ther information	concerning this matter, pleas	e call:
Sh	aron Stiles	.	at (816) 421-2500
	Name	of Person	Area Code & Daytime Telephone Number
Enclos	sed is a check fo	or the following amount:	
\$ 125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	DT	ICI	T	I _ 1	Nα	m	٠.
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The name of the Limited Liability Company is:

HCI Bridge Harbor, LLC

(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:

Principal Office Address:

Mailing Address:

1010 Walnut, Suite 500

Kansas City, Missouri 64106

1010 Walnut, Suite 500

Kansas City, Missouri 64106

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:

C T Corp	oration System
N	ame
1200 South	Pine Island Road
Florida street address ((P.O. Box NOT acceptable)
Plantation	FL 33324
City, Sta	ite, 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.

C T Corporation System

By.

See attached

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
•	
MGR	Paul Fingersh
	2020 West 89th St., Suite 320
	Leawood, Kansas 66206
MGR	Jack Fingersh
	1010 Walnut, Suite 500
,	Kansas City, Missouri 64106
MGR .	Irwin Blitt
,	11111 West 95th St., Suite 204
	Overland Park, Kansas 66214
- /	
EV: Effective date, if other that ective date is listed, the date mu	· · · · · · · · · · · · · · · · · · ·
ective date is listed, the date mulays after the date of filing.) REQUIRED SIGNATURE: HCI Integral By	ust be specific and cannot be more than five business d
EV: Effective date, if other that ective date is listed, the date me lays after the date of filing.) REQUIRED SIGNATURE: HCI Integral By	ust be specific and cannot be more than five business d
EV: Effective date, if other than ective date is listed, the date me lays after the date of filing.) REQUIRED SIGNATURE: HCI In By: Signature of a me of this document	vest be specific and cannot be more than five business of
EV: Effective date, if other than ective date is listed, the date me lays after the date of filing.) EEQUIRED SIGNATURE: HCI In By: Signature of a me of this document that the facts state	west be specific and cannot be more than five business of the store. LLC, Member ember or an authorized representative of a member. ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury
LE V: Effective date, if other than ective date is listed, the date me days after the date of filing.) REQUIRED SIGNATURE: HCI In By: Signature of a me of this document that the facts state	ember or an authorized representative of a member. ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ed herein are true.)

of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Re: HCI BRIDGE HARBOR, LLC

Having been named as registered agent and to accept service of process for HCI BRIDGE HARBOR, LLC at the place herein designated:

CT Corporation System 1200 South Pine Island Road Plantation, Florida 33324

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 for in Chapter 608, F.S.

Dated: September 22, 2009

CT Corporation System

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