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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

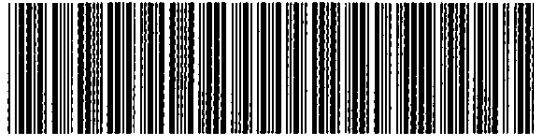
(Document Number)

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09 NOV 18 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

NOV 19 2009

EXAMINER

S. HAWKES

NOV 19 2009

EXAMINER

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2009

GORDON FORREST HAWKINS
3941 SW 1ST AVE
GAINESVILLE, FL 32607

SUBJECT: BEACHTREE PROFESSIONALS LLC
Ref. Number: W09000049383

We have received your document for BEACHTREE PROFESSIONALS LLC .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

The money order you sent is not legible.,

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 809A00035041

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BeachTree Professionals

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gordon Forrest Hawkins

Name of Person

Firm/Company

3941 SW 1st Ave

Address

Gainesville, FL 32607

City/State and Zip Code

forrest@beach-tree.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Hawkins

Name of Person

at (

352)

505-6343

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BeachTree Professionals 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:

3941 SW 1st Ave
Gainesville, FL 32607

Mailing Address:

3941 SW 1st ave
Gainesville, FL 32607

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:

Gordon Forrest Hawkins

Name

3941 SW 1st Ave

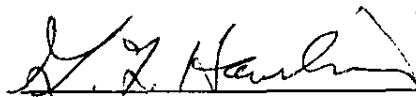
Florida street address (P.O. Box **NOT** acceptable)

Gainesville

FL

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)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Gordon Forrest Hawkins

3941 SW 1st Ave

Gainesville, FL 32607

MGR

Sandra S. Hawkins

3941 SW 1st Ave

Gainesville, FL 32607

(Use attachment if necessary)

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ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

G. F. Hawkins

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)