## L10000 60526

(R	equestor's Name	)
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PICK-UP	☐ WAIT	MAIL
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EFFECTIVE DATE 6 2 2010

B. KOHR

JUN - 7 <sub>2010</sub>

**EXAMINER** 



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: HBJ PC Support LLC 2 2016 Name of Limited Liability Company CTIVE DATE 2 2016
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Hamlet Proyston Bent Jr
41BJPC Support
26 No Adams St, Hattywood, Et 3.3020
Hollywood, FC 33020 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Homled Bent 37  at (404) 512-9836  Name of Person  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fec Certificate of Status □\$155.00 Filing Fee & Certificate of Status □\$155.00 Filing Fee & Certificate of Status & Certificate of St
Mailing Address Registration Section  Street/Courier Address Registration Section

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

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

ARTICLES OF ORGANIZATION FOR FLA	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	The Confession of the Confessi
HBJ PC Support  (Must end with the words "Limited Liability)	Services LLC y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Hollywood, FC 32020	2616 Adams St Hollywood, FL 33020
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered)	

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

Hamlet Bent 31 Florida street address (P.O. Box NOT acceptable)

Hollywood FL 330 20

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

## Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) 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 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

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

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

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)

that the facts stated herein are true.)

Typed or printed name of signee