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SECKETARY OF STATE
TALL AHASSEF, FINALE

D. BRUCE

SEP 07 2010

EXAMINER

COVER LETTER

TO: Registration 5 Division of Co			• `		
SUBJECT: Hillow &		ed Liability Company			
		• • •			
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.			
Please return all corresp	pondence concerning this mat	ter to the following:			
Regis Hillow					
		Name of Person		-	
***		Firm/Company		-	
5441 Osprey	Isle Lane				
<u></u>		Address		-	
Orlando, FL 3	32819				
RHC		y/State and Zip Code		•	
		for future annual report notification)	om Pr	_	
For further information	concerning this matter, please	•	AAR H	SEF	-17
roi tuttiet illioilliation	concerning this matter, please	e cair.	TAR ASS	Ġ	
Regis Hillow		_at (_407)921-7171		A	Ш
Name	of Person	Area Code & Daytime Telep	hone Number	Ş	
Enclosed is a check for	or the following amount:		STATE LORIDA	5	_
\$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		
	Malling Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations			

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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Hillow & Hillow LLC	
(Must end with the words "Limited Liab	nility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the part of th	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5441 Osprey isle Lane	5441 Osprey Isle Lene
Orlando, FL 32819	Orlando, FL 32819
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an individual or mother
Regis Hillow Nam	
5441 Osprey Isle Lane	ddress (P.O. Box NOT acceptable) FL 32819
City, S	State, and Zip

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

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

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

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

MGR	Regis Hillow 5441 Osprey Isle Lane
	Orlando, FL 32819
(Use attachment if necessary)	
LEV: Effective date, if other th	nan the date of filing: (OPTIONAL

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.)

Regis Hillow

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)

Page 2 of 2

