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(Requestor's Name)

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(City/State/Zip/Phone #)

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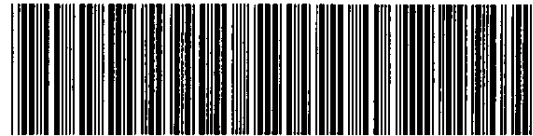
(Business Entity Name)

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TALLAHASSEE, FLORIDA

D. BRUCE

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EXAMINER

TIMOTHY G. HAYES AND ASSOCIATES, P.A.
Attorneys at Law

Lakeview Professional Center
21859 State Road 54, Suite 200
Lutz, Florida 33549

TIMOTHY G. HAYES
Telephone (813) 949-6525 • Fax (813) 949-6433
e-mail: tghayes@mindspring.com

September 28, 2010

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Hawks, Eagle and Associate, LLC

Dear Sir or Madam:

Enclosed for filing please find the original and one copy of the Articles of Organization for the above limited liability company, along with a check in the amount \$125.00 for the filing fee and Designation of Registered Agent.

Sincerely yours,


DEBRAH MAYWORTH
Legal Assistant
HAYES & ASSOCIATES, P.A.
21859 State Road 54, Suite 200
Lutz, Florida 33549
(813) 949-6525

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TALLAHASSEE, FLORIDA

/dm
Encls.

ARTICLES OF ORGANIZATION

OF

HAWKS, EAGLE AND ASSOCIATES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I -- NAME

The name of the Limited Liability Company is: HAWKS, EAGLE AND ASSOCIATES, LLC

ARTICLE II -- ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

24014 State Road 54
Lutz, FL 33559

ARTICLE III -- REGISTERED OFFICE AND AGENT

The name and street address of the registered agent are:

J. KANKOTIA
24014 State Road 54
Lutz, FL 33559

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TALLAHASSEE, FLORIDA

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 of registered agent as provided for in Chapter 608, Florida Statutes.



Registered Agent's Signature

ARTICLE IV -- MANAGEMENT

(Check Box If Applicable)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company. The name and address of each Member or Managing Member is as follows:

Title:

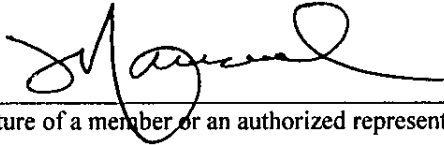
"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

J. KANKOTIA
24014 State Road 54
Lutz, FL 33559



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.)

J. KANKOTIA

Typed or printed name of signee

September 28, 2010

DATE

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TALLAHASSEE, FLORIDA

Filing Fees:

\$100.00 Filing fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)