

L11 0000003783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

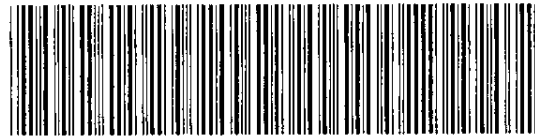
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/10/11--01025--002 **160.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JAN 10 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2010

BRIAN HOOD
6001 N A1A, PMB 8121
INDIAN RIVER SHORES, FL 32963

SUBJECT: HOOD LANDSCAPING, LLC
Ref. Number: W10000057741

We have received your document for HOOD LANDSCAPING, LLC and check(s) totaling \$320.00. However, your check(s) and document are being returned for the following: .

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on December 13, 2010. Please amend your document accordingly.

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) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 710A00028898

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Hood Landscaping, LLC
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:

Brian Hood

Name of Person

Hood Landscaping, LLC

Firm/Company

6001 N. A1A, PMB 8121

Address

Indian River Shores, FL 32963

City/State and Zip Code

h.landscaping@comcast.net

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

For further information concerning this matter, please call:

Brian Hood

Name of Person

at (772)

234-4505

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

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SECRETARY OF STATE
TALLAHASSEE, FL

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12/8/10
4730



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 27, 2010

BRIAN HOOD
6001 N A1A, PMB 8121
INDIAN RIVER SHORES, FL 32963

SUBJECT: HOOD LANDSCAPING, LLC
Ref. Number: W10000057741

We have received your document for HOOD LANDSCAPING, LLC and check(s) totaling \$320.00. However, your check(s) and document are being returned for the following:

The amount due to file the document is \$160.00.

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) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 210A00029763

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Hood Landscaping, 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:

7715 66th Ave

Vero Beach, FL 32967

Mailing Address:

6001 N. A1A, PMB 8121

Indian River Shores, FL 32963

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:

Brian Hood

Name

6001 N. A1A

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

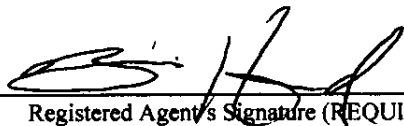
Indian River Shores

FL 32963

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

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)

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

Brian Hood

6001 N A1A, PMB 8121

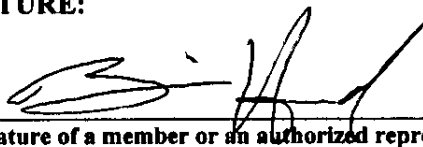
Indian River Shores, FL 32963

(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 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Brian Hood

Typed or printed name of signee

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SECRETARY OF
TALLAHASSEE

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)