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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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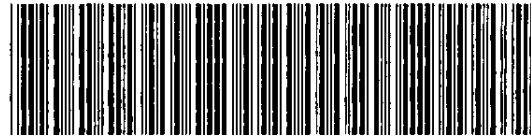
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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FEB 18 2011

EXAMINER

TROIANO & ROBERTS, P.A.

ATTORNEYS AT LAW

317 S. TENNESSEE AVENUE

LAKELAND, FLORIDA 33801-4617

D. A. TROIANO (1929-2005)
CLYDE L. ROBERTS (1927-1971)

VICTOR J. TROIANO
NICHOLAS J. TROIANO
LAURIANE CICCARELLI

REPLY TO:
P. O. DRAWER 829
LAKELAND, FLORIDA 33802-0829
TELEPHONE (863) 686-7136
FAX (863) 686-9157

February 16, 2011

VIA FEDEX

Florida Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Re: Hustle 429, LLC
Our File No.: B110087

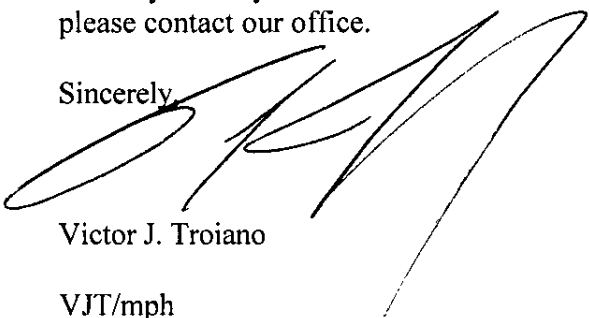
Dear Sirs:

Enclosed please find the original and one copy of the Articles of Organization for the above named entity. After filing, please return a certified copy of the Articles to my office as soon as possible. I have also enclosed a check in the amount of \$155.00 to cover your filing fees, registered agent fee and the cost of obtaining a certified copy.

I am also enclosing a prepaid FEDEX mailer for the return of the certified copy of the Articles of Organization.

Thank you for your assistance in this matter. Should you have questions or comments, please contact our office.

Sincerely,


Victor J. Troiano

VJT/mph
Enclosures

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The Name of the Limited Liability Company is: HUSTLE 429, LLC

ARTICLE II – Address:

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

a: Mailing Address: 429 Timberlane E, Lakeland, FL 33801-6618

b: Street Address: 429 Timberlane E, Lakeland, FL 33801-6618

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

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

DAN FLING

Name

429 Timberlane E

Florida street address (Post Office Box **NOT** acceptable)

Lakeland, FL 33801-6618

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.

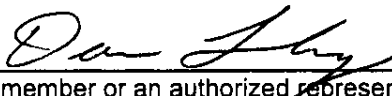


Registered Agent's Signature

ARTICLE IV – Management (Check applicable box)

_____ The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company.

 X The Limited Liability Company is to be managed by one member or members and is, therefore, member - managed company.



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.)

DAN FLING

Typed or printed name of signee

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