

L11000066920

Joyce Hughes  
(Requestor's Name)

1940 Charlais St  
(Address)

(Address)

Tallahassee FL

(City/State/Zip/Phone #)

850-445-1028

☐ PICK-UP

☐ WAIT

☐ MAIL

Harmony Rhythms, LLC  
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000208138790

06/09/11--01001--003 \*\*125.00

RECEIVED

11 JUN - 8 PM 1:49

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

11 JUN - 8 PM 1:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

JUN - 8 2011

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Harmony Rhythms, LLC  
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

FILED  
11 JUN -8 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

1940 Charlais St  
Tallahassee, FL  
32317

Mailing Address:

Same

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:

Joyce C. Hughes  
Name  
1940 Charlais St  
Florida street address (P.O. Box **NOT** acceptable)  
Tallahassee FL 32317  
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..*

Joyce C. Hughes  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
11 JUN -8 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:**

MGRM

MGRM

Joyce Hughes  
1940 Chantais St.  
Tallahassee, FL 32317

Kent B. Hutchinson  
911 San Luis Rd.  
Tallahassee, FL 32304

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 6-8-2011. (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:**

Kent B. Hutchinson  
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.)

Kent B. Hutchinson  
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)