# 11000083855

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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# **COVER LETTER**

TO:	Registration of	on Section Corporations		
SUBJE	ст. Gre	enville Hardware, I	LLC	
50101			ted Liability Company	
The en	closed Article	es of Organization and fee(s) are	submitted for filing.	
Please	return all corr	respondence concerning this mat	ter to the following:	
	Robin H	Housh		
			Name of Person	
	Greenv	ille Hardware, LLC	:	
			Firm/Company	
	P.O. Bo	ox 694		
		•	Address	
(	Greenvill	e, Fl. 32331		
			ry/State and Zip Code	
-	osteenrot	Din@yahoo.com  E-mail address: (to be used to	for future annual report notification)	
For fur	her informati	on concerning this matter, please	e call:	
Robii	n Housh		at (850 ) 464-7699	
<del></del> .	Na	me of Person	Area Code & Daytime Telephone Number	
Enclos	ed is a check	for the following amount:		
S125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed)  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	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Greenville Hardware, LLC	
(Must end with the words "Limited Lie	ability 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:	Mailing Address:
13757 Hwy US 90 W	P.O. Box 694
Greenville, FI 32331	Greenville, Fl. 32331
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)  The name and the Florida street address of the William Housh  Name	e registered agent are:
266 NW Legget	t Ave.
	address (P.O. Box NOT acceptable)
Greenville	<sub>FL</sub> 32331
City,	State, and Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S
Registered Agent's Sign	R. House (REQUIRED)
(CONTI	MILLEDY CALL

Page 1 of 2

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	er
MGR	Robin Housh
- India	P.O. Box 694
	Greenville, Fl. 32331
<del>* **</del>	
(Use attachment if necessary)	
•	
CLE V: Effective date, if other t	han the date of filing: (OPTIONAL)
	must be specific and cannot be more than five business days
days after the date of filing.)	
REQUIRED SIGNATURE:	•
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	din Housh

(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.)

### **Robin Housh**

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)