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SECHETARY OF STATE

C. LEWIS

DEC 8 2011

EXAMINER

COVER LETTER

TO:	Registratio	n Section Corporations	
	DIARIOU OI	Corporations	
SURIE	ст. Hann	ah Sign Service LLC	
SOBJE	,C1. <u></u>	Name of Limi	ted Liability Company
	4	•	···
The enc	losed Article	s of Organization and fee(s) are	submitted for filing.
Please r	eturn all corr	espondence concerning this mat	ter to the following:
[Dean Han	nah	
			Name of Person
,	llammah C	inn Camilaa I I C	
<u> </u>	nannan 5	ign Service LLC	Firm/Company
			·
	5430 Jaco	ob Ave	
-			Address
P	olk City, F		
		•	ty/State and Zip Code
<u>d</u>	leanrhann	ah@yahoo.com	for future annual report notification)
		E-mail address: (to be used	for future annual report notification)
For furt	her informati	on concerning this matter, pleas	e call:
Dean l	Hannah		_at (863) 242-9489
	Na	me of Person	Area Code & Daytime Telephone Number
Enclose	ed is a check	c for the following amount:	
			—
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status &
		Certificate of Status	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section	Street/Courier Address Registration Section
		Division of Corporations	Division of Corporations
		P.O. Box 6327	Clifton Building
		Tallahassee, FL 32314	2661 Executive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:				
Hannah Sign Service LLC		, -		
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Li	iability Co	ompar	ıy is:
Principal Office Address:	Mailing Address:	٠.		
5430 Jacob Ave.	5430 Jacob Ave.			
Polk City, FL 33868	Polk City, FL 33868			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the registration. Dean Hannah	tered Agent. You must designate an indiv	s Signatu idual or anot SECRETA TALLAHA	re: ther 2011 DEC = 7.	<u>n</u>
Name		RY O	÷	LEU
5430 Jacob Ave.		F S	TY OF	
- "	tress (P.O. Box <u>NOT</u> acceptable)	TATE	酬匮 24	
City, Sta	FL ate, and Zip			
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered Agent's Signature.	his certificate, I hereby accept the v. I further agree to comply with rformance of my duties, and I and stered agent as provided for in C	ie appoint i the provi n familiar	ment disions with d	as of all and

(CONTINUED)

Title: "MGR" = Manager "MGRM" = Managing Member	Managing Member(s): Manager or Managing Member is as follows: 2011 DEC -7 Name and Address: SECRETARY OF TALLAHASSEE.
MGR	Dean Hannah 5430 Jacob Ave. Polk City, FL 33868
CLE V: Effective date, if other th	nan the date of filing: (OPTIONAL nust be specific and cannot be more than five business days
CLE V: Effective date, if other the ffective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE:	
CLE V: Effective date, if other the ffective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Signature of a graph of the date of filing.	nust be specific and cannot be more than five business days

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)