# 1200000891

(Re	equestor's Name)	
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**EXAMINER** 



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SECRETARY OF STATE

# **COVER LETTER**

TO: Registration of Division of	on Section f Corporations	
SURJECT: Hol	ly Lynn, LLC	
501ABC1.	Name of Limit	ed Liability Company
The enclosed Article	es of Organization and fee(s) are	submitted for filing.
Please return all cor	respondence concerning this mat	ter to the following:
Holly L	. Haeseker	
<u> </u>		Name of Person
		F' (C
		Firm/Company
221 Ric	dge Road	
		Address
Jupiter F	L, 33477	
		y/State and Zip Code
MissHoll	yLynn@gmail.com	for future annual report notification)
For further informat	tion concerning this matter, please	
FOI TURNIEL IMORMA	non concerning this matter, pleas	con.
Holly L. Haes	eker	at ( 561 ) 358-8274
N:	ame of Person	Area Code & Daytime Telephone Number
Enclosed is a chec	ck for the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Sertified 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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:	
Holly Lynn, 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	ne principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
221 Ridge Road Jupiter, FL 33477	221 Ridge Road Jupiter, FL 333477	
Jupiter, Ft. 35477	- Capitor, 1 E 000471	<del></del>
business entity with an active Florida registration.)  The name and the Florida street address of the Holly L. Haeseker  221 Ridge Ro	lame	11 DEC 29 AM SECRETARY OF FALLAHASSEELI
	et address (P.O. Box NOT acceptable)	FS: S
Jupiter	<sub>FL</sub> 33477	AMO: 30 OF STATE E. FLORIE
Cit	y, State, and Zip	<b>→</b>
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	d in this certificate, I hereby accept the pacity. I further agree to comply with te performance of my duties, and I am	e appointment as the provisions of all 1 familiar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

	Holly L. Haeseker 221 Ridge Road Jupiter, FL 33477
<del></del>	
Use attachment if necessary)	

**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.)

Holly L. Haeseker

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)