L12000026369

(Re	equestor's Name)	
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(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,

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02/13/12--01047--013 **160.00

Effective Date 3/1/12

12 FEB 22 PH 2: 38



COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: Haberl Properties, UC Name of Limited Liability Company
The enc	losed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	M, Lynn Haber Name of Person
	Haberl Properties, LLC
	2233 Malachite DR
_	Address
_	Lakeland, F1. 33810 City/State and Zip Code
	City/Stafe and Zip Code LHaber Qaol. Com E-mail address: (to be used for future annual report notification)
	E-mail address: (to be used for future annual report notification)
For furth	ner information concerning this matter, please call:
	Ynn Haber at (863) 858-4863 Name of Person Area Code & Daytime Telephone Number
	ed is a check for the following amount: Filing Fee \$\int\\$130.00 \text{ Filing Fee & \$\int\\$160.00 \text{ Filing Fee,}
S125.00	Filing Fee \$\ \tag{\$130.00}\$ Filing Fee & \$\ \tag{\$155.00}\$ Filing Fee & \$\ \tag{\$160.00}\$ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address Street/Courier Address Parity tion Section Parity tion Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

12 FEB 22 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 14, 2012

M LYNN HABERL 2233 MALACHITE DR LAKELAND, FL 33810

SUBJECT: HABERL PROPERTIES, LLC

Ref. Number: W12000008848

We have received your document for HABERL PROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 14, 2012. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 912A00006841

Effective Date 3/1/12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ANTICEES OF ORGANIZATION FOR FLORIDA ENVITTED ETABLETT CON	пл	41
ARTICLE I - Name: The name of the Limited Liability Company is:		
Haber Properties L.L.C. (Must end with the words "Limited Liability Company," L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co.	mpan	y is:
Principal Office Address: Mailing Address: —		<u> </u>
2233 Malachite DR Same. Lakeland, F133810		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anoth business entity with an active Florida registration.)	fe: ler	
The name and the Florida street address of the registered agent are: Partish a Partish CPA's, P.A. Name 6700 S. Florida Ave, Ste 25 Florida street address (P.O. Box NOT acceptable) Lalleland, FL FL 33813 City, State, and Zip		
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the provis statutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 60c.	ment d sions d with d	as of all and
Régistered Agent's Signature (RÉQUIRED)	12 FEB 22	SECRETAR DIVISION OF
(CONTINUED) Page 1 of 2	2 PH 2:	LED SY OF STAT CORPORAT

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
<u>Mgr</u>	M. Lynn Haber 2233 Malachite DR 19Keland = F133810
_Mgr	Frederick R. Habert 2233 Malachite Dr Lakeland, Fl 33810
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	March
ICLE V: Effective date, if other than the	
ICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE:	date of filing: 2012. (OPTIONAL) e specific and cannot be more than five business days p
effective date is listed, the date must be 90 days after the date of filing.)	e specific and cannot be more than five business days portion of the second sec
REQUIRED SIGNATURE: Signature of a member of a member of a maximum and	er or an authorized representative of a member. 3.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. Ination submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
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