

L/2000089096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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

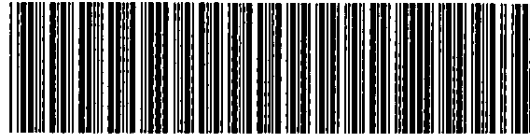
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**EXAMINER**

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TALLAHASSEE, FLORIDA

## **LAW OFFICE OF FRANK J. PYLE**

FRANK J. PYLE, JURIS DOCTOR  
LIVING TRUSTS & FLORIDA PROBATE ATTORNEY  
401 WEST COLONIAL DRIVE, SUITE 4  
ORLANDO, FLORIDA 32804-6855

EMAIL: [Probate@AttorneyFrankPyle.com](mailto:Probate@AttorneyFrankPyle.com)  
TELEPHONE: (407) 872-1965  
FACSIMILE: (407) 872-1930  
[www.ReasonableProbate.com](http://www.ReasonableProbate.com)

June 22, 2012

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

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TALLAHASSEE, FLORIDA

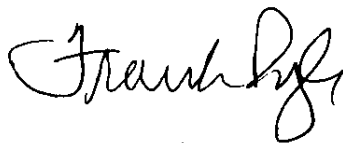
Re: Hammond & Shah Properties, LLC

To Whom It May Concern:

Please register the enclosed Articles Of Organization and Designation Of Registered Agent for Hammond & Shah Properties, LLC, and send me one Certificate Of Status.

My check for \$130.00 is enclosed..

Sincerely,



Frank J. Pyle

FJP/ccb  
Enclosure(s)

**ARTICLES OF ORGANIZATION FOR  
HAMMOND & SHAH PROPERTIES, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is HAMMOND & SHAH PROPERTIES, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of HAMMOND & SHAH PROPERTIES, LLC is:

**Principal Office Address:**

1932 Thesy Drive  
Viera, Florida 32940

**Mailing Address:**

1932 Thesy Drive  
Viera, Florida 32940

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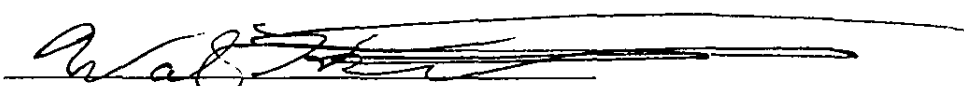
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**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and Florida street address of the registered agent are:

WALTER P. HAMMOND  
1932 Thesy Drive  
Viera, Florida 32940

*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.*

  
Registered Agent's Signature

**ARTICLE IV - Managing Member:**

The name and address of the Managing Member is as follows:

**Title:**

Managing Member

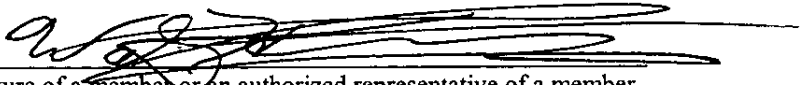
**Name and Address:**

WALTER P. HAMMOND  
1932 Thesy Drive  
Viera, Florida 32940

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**ARTICLE V: Effective date: date of filing**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under 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.)

  
Signature of a member or an authorized representative of a member.

WALTER P. HAMMOND