

L12000137156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

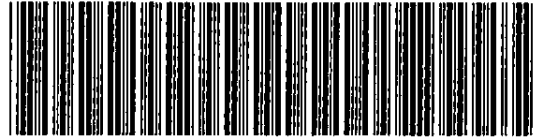
Special Instructions to Filing Officer:

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Office Use Only

OCT 29 2012

EXAMINER



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FILED
12 OCT 26 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LARRY M. STEWART, P.A., Attorney at Law

73 S.W. Flagler Avenue, Stuart, FL 34994
Post Office Box 809, Stuart, FL 34995
Office (772) 283-8191
Facsimile (772) 283-4396
lms2ep@bellsouth.net

October 23, 2012

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RE: DLHMCH Properties, LLC

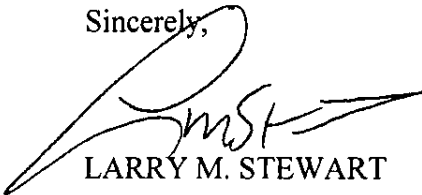
Dear Sirs:

Enclosed please find Articles of Organization for DLHMCH, LLC. Also enclosed please find our check in the amount of \$130.00 for your filing fee.

Please return the Certificate of Status to our office at the address above.

Thank you for your assistance in this matter.

Sincerely,



LARRY M. STEWART

LMS/sfn

Enclosures

cc: Mr. and Mrs. Donald Hoolan

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DLHMCH Properties, LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald L. Hoolan

Name of Person

Firm/Company

918 S.W. Grand Reserve Boulevard

Address

Port St. Lucie, FL 34986

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donald L. Hoolan

Name of Person

at (772) 204-2109

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified 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 is:

DLHMCH Properties, 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 principal office of the Limited Liability Company is:

Principal Office Address:

918 S.W. Reserve Boulevard
Port St. Lucie, FL 34986

Mailing Address:

918 S.W. Reserve Boulevard
Port St. Lucie, FL 34986

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Donald L. Hoolan

Name

918 S.W. Reserve Boulevard

Florida street address (P.O. Box **NOT** acceptable)

Port St. Lucie

FL

City, State, and Zip

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TALLAHASSEE, FLORIDA

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 (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

Donald L. Hoolan, MGRM

918 S.W. Reserve Boulevard

Port St. Lucie, FL 34986

Mary C. Hoolan MGRM

918 S.W. Reserve Boulevard

Port St. Lucie, FL 34986

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Donald L. Hoolan
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)