

From:

Division of Corporations

11/27/2012 08:26

#008 P.001/003

Page 1 of 1

L12000148415

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000278021 3)))



H120002780213ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : PYLE & DELLINGER, PL.
Account Number : I200000000053
Phone : (386) 615-9007
Fax Number : (386) 676-2615

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jennifers@pylelaw.com

RECEIVED
12 NOV 27 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
Hailey Espanola, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

B. KOHR

Electronic Filing Menu

Corporate Filing Menu
NOV 28 2012

Help

EXAMINER

From:

11/27/2012 08:26

#008 P.002/003

((H12000278021 3)))

**ARTICLES OF ORGANIZATION
OF
HAILEY ESPANOLA, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby executes the following Articles of Organization.

**ARTICLE I
NAME**

The name of the Limited Liability Company is **HAILEY ESPANOLA, LLC.**

**ARTICLE II
ADDRESS**

The street address and the mailing address of the principal office of the Company is **114 River Bluff Drive, Ormond Beach, FL 32174.**

**ARTICLE III
REGISTERED OFFICE AND AGENT**

The name of the Registered Agent is **Claudia H. Ehringer** and Florida street address of the registered agent is **114 River Bluff Drive, Ormond Beach, FL 32174.**

**ARTICLE IV
MANAGEMENT**

The Company is managed by a Manager. The person initially appointed as Manager is **Claudia H. Ehringer.**


IN WITNESS WHEREOF, the undersigned Authorized Representative has executed these Articles of Organization on this 27 day of November, 2012.


Claudia H. Ehringer

**STATE OF FLORIDA
COUNTY OF VOLUSIA**

The foregoing Instrument was acknowledged before me this 27 day of November, 2012, by **Claudia H. Ehringer** who ☒ is personally known to me, or ☐ who presented a Florida drivers license or ☐ a _____ drivers license or ☐ _____, as identification.




Notary Public
Michael A. Pyle
(Printed Name)
My Commission Expires:

(In accordance with Section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

((H12000278021 3)))

From:

11/27/2012 08:26

#008 P.003/003

((H12000278021 3)))

ACCEPTANCE OF DESIGNATION

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, Florida Statutes.


Claudia H. Ehringer, Registered Agent

((H12000278021 3)))