L13000035173

(Requestor's Name)
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(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

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

Jason Thomas	Name of Person
· · · · · · · · · · · · · · · · · · ·	Firm/Company
2157 Lake Dr.	
	Address
Winter Park, Flo	rida 32789
jasonthomas12348	
E-mail address: (t For further information concerning this matt	o be used for future annual report notification) ter, please call:
Jason Thomas	407 252-2611
Name of Person	Area Code & Daytime Telephone Number

_

□\$125.00 Filing Fee
□\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee,

Certificate of Status

Certified Copy
(additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2013

JASON THOMAS 2157 LAKE DRIVE WINTER PARK, FL 32789

SUBJECT: HAU HELE WAI PADDLEBOARDING

Ref. Number: W13000010518

We have received your document for HAU HELE WAI PADDLEBOARDING and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return 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.

Leslie Sellers Regulatory Specialist II

Letter Number: 013A00004224

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	, ie:	
The hame of the Emitted Etablicy Company	/ 15.	
Hau Hele Wai Paddlboarding LLC		
(Must end with the words "Limited I	.iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
2157 Lake Drive	2157 Lake Drive	
Winter Park, FL	Winter Park, FL	
32789	32789	
The name and the Florida street address of the Pamela C Thomas Consulting	-	
	ame	
2157 Lake Drive	t address (P.O. Box NOT acceptable)	
	t dddress (r.o. Box <u>itor</u> deceptable)	
	a	
Winter Park, FL 32789	FL y, State, and Zip	
Winter Park, FL 32788 City Having been named as registered agent and liability company at the place designated registered agent and agree to act in this call statutes relating to the proper and compand accept the obligations of my position a	y, State, and Zip I to accept service of process for the in this certificate, I hereby accept the pacity. I further agree to comply wi plete performance of my duties, and	ne appointment as th the provisions of I am familiar with

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	
MGRM	Jason Thomas
	2157 Lake Drive
	Winter Park, FL 32789
(Use attachment if necessary)	
USE attachment if necessary	
(Ose attachment if necessary)	
LE V: Effective date, if other than	
LE V: Effective date, if other than effective date is listed, the date n	n the date of filing: (OPTIONA nust be specific and cannot be more than five busines
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LE V: Effective date, if other than effective date is listed, the date is or 90 days after the date of filing REOUIRED SIGNATURE: Signature of a me	nust be specific and cannot be more than five busines g.) Ember or an authorized representative of a member. 1 608.408(3), Florida Statutes, the execution of this document
LE V: Effective date, if other than effective date is listed, the date is or 90 days after the date of filing REOUIRED SIGNATURE: Signature of a me (in accordance with section constitutes an affirmation u	nust be specific and cannot be more than five busines g.) mber or an authorized representative of a member.

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)

Typed or printed name of signee