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| (Re                     | questor's Name)    | <del></del> |
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| PICK-UP                 | WAIT               | MAIL        |
| (Bu                     | siness Entity Nan  | ne)         |
| (Do                     | cument Number)     |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
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Effective Date 04/22/3

FILED
2013 APR 23 PH 3: 54
SECRE FARY DE STATE

APR 2 4 2013 J. BRYAN (850) 245-6051.

## **COVER LETTER**

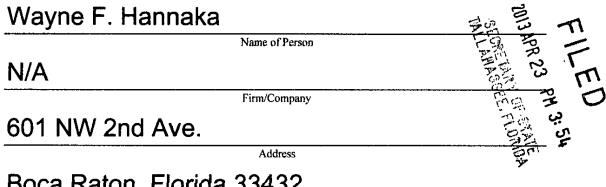
TO: **Registration Section Division of Corporations** 

HC ONE Enterprises, 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:



Boca Raton, Florida 33432

City/State and Zip Code

slwh@windstream.net

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

For further information concerning this matter, please call:

Wayne Hannaka Name of Person

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 AMISHRA SA PA 3: 51. **ARTICLE I - Name:** The name of the Limited Liability Company is: HC ONE Enterprises, 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: Mailing Address:** 601 N.W. 2nd Ave. 601 N.W. 2nd Ave Boca Raton, Florida 33432 Boca Raton, Florida 33432 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.) Effective Date 04/22/13 The name and the Florida street address of the registered agent are: Wayne F. Hannaka Name

Name

601 N.W. 2nd Ave

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

Boca Raton FL 33432

City, State, and Zip

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)

Page 1 of 2

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

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

| "MGRM" = Managing Member              |   |
|---------------------------------------|---|
| MGRM                                  | Wayne F. Hannaka 601 N.W. 2nd Ave Boca Raton, Florida 33432 |
|                                       | 601 N.W. 2nd Ave  |
|                                       | Boca Raton, Florida 33432                                   |
|                                       |   |
| MGR                                   | Sandra Hannaka  |
|                                       | 601 N.W. 2nd Ave  |
|                                       | Boca Raton, Florida 33432                                   |
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|                                       | **************************************                      |
| (Use attachment if necessary)         |   |
| (,,                                   |   |
| LE V: Effective date, if other than t | he date of filing: April 22, 2013 . (OPTIONA                |
|                                       | ust be specific and cannot be more than five busine         |
| or 90 days after the date of filing.  |   |
| <b>_</b>                              | ,   |
|                                       |   |
|                                       |   |
| REQUIRED SIGNATURE:                   |   |

(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.)

Wayne F. Hannaka

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)