# 13000085106

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
| ·                                       |
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 29, 2013

THOMAS PYCRAFT, JR.
PYCRAFT LEGAL SERVICES, LLC
3505 U.S. ONE SOUTH, STE. 2
ST. AUGUSTINE, FL 32086

SUBJECT: CHILDREN'S HOPE OF FLORIDA, LLC

Ref. Number: W13000031171



We have received your document for CHILDREN'S HOPE OF FLORIDA, LLC and your check(s) totaling \$160.00. However; the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The existing entity with a similar name is CHILDREN'S HOPE CORPORATION - Doc. Number F13000001672.

Remember that the addition of the words FLORIDA or OF FLORIDA does not constitute a significant name difference.

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.

Buck Kohr Regulatory Specialist II

Letter Number: 813A00013510



3505 US 1 South, Suite 2 St. Augustine, FL 32086

Phone (904) 940-0060 - Fax (866) 656-3282 - www.pycraftlaw.com

June 4, 2013

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

Re: Reference No.: W13000031171

Létter No.: 813A00013510

Children's Hope of Florida, LLC

To Whom It May Concern,

I am in responding to your letter of May 29, 2013 in the above referenced matter. Enclosed is a new form for your review. The LLC name has been changed from the original proposal. As the filing fee accompanied the last application, please apply that to this new application.

Thank you for your assistance. Please contact me if you have any questions.

Sincerely,

John J. Spence

Attorney

(enclosures)

# **COVER LETTER**

| TO: Registration Section Division of Corporations  |
|--|
| SUBJECT: CHOF, 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:  |
| Thomast Pycraft, Jr.   |
| Name of Person   |
| Pycraft Legal Services, LLC  |
| Firm/Company   |
| 3505 US 1 South, Suite 2   |
| Address  |
| St. Augustine, FL 32086  |
| Info@ Pycrafity/State and Zip Code  E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Thomas Pycraft, Jr. 904 940-0060   |
| Name of Person Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amount:  |
| □\$125.00 Filing Fee & □\$130.00 Filing Fee & □\$155.00 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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:  |   |
|--|---|
| The name of the Limited Liability Company is:  |   |
|  |   |
| CHOF,LLC   |   |
| (Must end with the words "Limited Liabil   | ity Company, "L.L.C.," or "LLC.")                       |
| ARTICLE II - Address:  |   |
| *  | incipal office of the Limited Liability Company is:     |
|  |   |
| Principal Office Address:  | Mailing Address:  |
| 28533 Discovery Rd   | 28533 Discovery Rd                                      |
| TAVARES FL 32778   | TAVARES EL 3777R  |
|  |   |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the registration. | ered Agent. You must designate an individual or another |
| Pycraft Legal Services, LLC  |   |
| Name   |   |
| 3505 US 1 South, Suite 2   |   |
|  | Iress (P.O. Box NOT acceptable)                         |
| St. Augustine  | 32086   |
| <del></del>  | ate, and Zip  |
| Having been named as registered agent and to   | accept service of process for the above stated limited  |

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   | Name and Address:   |
|--|---|
| MGRM   | Anita Houchins  28533 Discovery Ro  TAVARES, FL 32778   |
|  |   |
|  |   |
|  |   |
| (Use attachment if necessary)  |   |
|  |   |
| CLE V: Effective date, if other than the effective date is listed, the date must o or 90 days after the date of filing.)   | date of filing: (OPTIONAL) be specific and cannot be more than five business  |
| effective date is listed, the date must  | date of filing: (OPTIONAL)  be specific and cannot be more than five business   |
| effective date is listed, the date must o or 90 days after the date of filing.)  REQUIRED SIGNATURE:   | be specific and cannot be more than five business  Alack  |
| effective date is listed, the date must o or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member  | be specific and cannot be more than five business  The charge of a member.  |
| effective date is listed, the date must o or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of | be specific and cannot be more than five business  Alack  |
| effective date is listed, the date must o or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a may are that any false inform constitutes a third degree felony and a Houchins  | r or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.) |
| effective date is listed, the date must o or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a may are that any false inform constitutes a third degree felony and a Houchins  | Tor an authorized representative of a member.  408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, action submitted in a document to the Department of State                                     |

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)