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DIVISION OF CORPORATION

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T. HAMPTON

#### COVER LETTER

TO:

Registration Section **Division of Corporations** 

Hatley 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:

## Tim Hatley

Name of Person

Hatley Enterprises, LLC

Firm/Company

318 East Royal Fern Way

Santa Rosa Beach, FL 32459

City/State and Zip Code

timhatley@msn.com

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

or further information concerning this matter, please call:

# **Tim Hatley**

850 \ 419-1467

Name of Person

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

Hallau Fatanniana I	10	
Hatley Enterprises, L	<del></del>	mited Liability Company. "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addr		of the principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
318 East Royal Fern	Way	318 East Royal Fern Way
Santa Rosa Beach, F	L 32459	Santa Rosa Beach, FL 32459
(The Limited Liability business entity with a	Company cannot serve as its in active Florida registration.)	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its in active Florida registration.)	own Registered Agent. You must designate an individual or another s of the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its in active Florida registration.) e Florida street addres	own Registered Agent. You must designate an individual or another
(The Limited Liability business entity with a	Company cannot serve as its in active Florida registration.) e Florida street addres  Tim Hatley  318 East Royal Fern W.	own Registered Agent. You must designate an individual or another s of the registered agent are:  Name
(The Limited Liability business entity with a	Company cannot serve as its in active Florida registration.)  E Florida street addres  Tim Hatley  318 East Royal Fern William Florida	own Registered Agent. You must designate an individual or another s of the registered agent are:  Name  ay a street address (P.O. Box NOT acceptable)
(The Limited Liability business entity with a	Company cannot serve as its in active Florida registration.)  E Florida street addres  Tim Hatley  318 East Royal Fern William Florida	own Registered Agent. You must designate an individual or another s of the registered agent are:  Name  ay a street address (P.O. Box NOT acceptable) ta Rosa Beach, FL 32459
(The Limited Liability business entity with a The name and the	Company cannot serve as its in active Florida registration.)  E Florida street addres  Tim Hatley  318 East Royal Fern Wing Florida  Sani	s of the registered agent are:  Name  as treet address (P.O. Box NOT acceptable)  ta Rosa Beach, FL 32459

Registered Agent's Signature (REQUIPED)

Page 1 of 2

(CONTINUED)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing M	lember
MGRM	Tim Hatley
	318 East Royal Fern Way
	Santa Rosa Beach, FL 32459
MGR	Kim Hatley
	318 East Royal Fern Way
	Santa Rosa Beach, FL 32459
<u></u>	
	·
Use attachment if necess	sary)
LE V: Effective date, if of	other than the date of filing: (OPTION
Use attachment if necess  LE V: Effective date, if offective date is listed, the or 90 days after the date	other than the date of filing: (OPTION le date must be specific and cannot be more than five busin
LE V: Effective date, if c	other than the date of filing: (OPTION le date must be specific and cannot be more than five busin
LE V: Effective date, if of fective date is listed, the or 90 days after the date	other than the date of filing: (OPTION le date must be specific and cannot be more than five busing of filing.)
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LE V: Effective date, if of fective date is listed, the or 90 days after the date	other than the date of filing: (OPTION le date must be specific and cannot be more than five busing of filing.)
LE V: Effective date, if of fective date is listed, the or 90 days after the date REQUIRED SIGNATU	other than the date of filing: (OPTION le date must be specific and cannot be more than five busing of filing.)
LE V: Effective date, if offective date is listed, the or 90 days after the date of Signatu (In accordance w	other than the date of filing:
LE V: Effective date, if offective date is listed, the or 90 days after the date of 90 days after the 90 days afte	other than the date of filing:

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