

**L13000135308**

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.**

((H13000212511 3)))



H130002125113ABCQ

**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 : (950) 617-6383

SEP 25 2013

From:

Account Name : EMPIRE CORPORATE KIT COMPANY SELLERS  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
HF VACATION MANAGEMENT, LLC**

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

RECEIVED  
FILED  
13 SEP 24 PM 3:03 SEP 20 AM 8:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
TALLAHASSEE, FLORIDA  
66005

Electronic Filing Menu

Corporate Filing Menu

Help

H13000212511

③

**ARTICLES OF ORGANIZATION  
OF  
HF VACATION MANAGEMENT, LLC**

**ARTICLE I**

**Name**

The name of this Limited Liability Company shall be HF VACATION MANAGEMENT, LLC.

**ARTICLE II**

**Address**

The mailing address of the principal office of the Limited Liability Company is: 772 Desert Mountain Court, Reunion, Florida 34747.

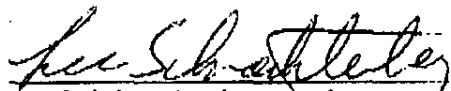
**ARTICLE III**

**Registered Agent, Registered Office, and Registered Agent's Signature**

The name and the Florida street address of the Registered Agent are:

Lee C. Schmachtenberg  
1533 Sunset Drive, Suite 201  
Coral Gables, Florida 33143

Having been named as the 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 his 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.

  
\_\_\_\_\_  
Lee C. Schmachtenberg, Registered Agent

Prepared by:  
Lee C. Schmachtenberg, Esq.  
1533 Sunset Drive, Suite 201  
Coral Gables, FL 33143  
(305) 666-4678  
Florida Bar No. 175843

H13000212511

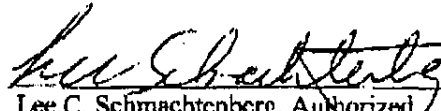
**ARTICLE IV**  
**Managers and Managing Member**

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

<u>Title</u>	<u>Name and Address</u>
MGRM	Jason Rammell 772 Desert Mountain Court Reunion, FL 34747
MGRM	Victoria Rammell 772 Desert Mountain Court Reunion, FL 34747

**ARTICLE V**  
**Effective Date**

The effective date for this Limited Liability Company is September 23, 2013.

  
\_\_\_\_\_  
Lee C. Schmachtenberg, Authorized  
Representative of a Member

(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.)

Prepared by:  
Lee C. Schmachtenberg, Esq.  
1533 Sunset Drive, Suite 201  
Coral Gables, FL 33143  
(305) 686-4676  
Florida Bar No. 175843

FILED  
13 SEP 20 AM 8:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H13000212511