

L 13000164252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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EFFECTIVE DATE
11-18-2013

11/21/13--01012--020 **130.00

FILED
Nov 21, 2013 08:00 AM
Secretary of State

K. SALLY
EXAMINER
NOV 22 2013

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Brigit Hawk Agency
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:

Brigit Hawk
Name of Person

State Farm Insurance
Firm/Company

4265 Old Water Oak Road, Suite 105
Address

Tallahassee, Florida 32312
City/State and Zip Code

BHawk01@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brigit Hawk
Name of Person

at (850) 377-6299
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

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE
11-18-2013

Bright Hawk Agency, 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:

<u>6265 Old Water Oak Road,</u>	<u>same</u>
<u>Suite 105</u>	
<u>Tallahassee, FL 32312</u>	

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.)

The name and the Florida street address of the registered agent are:

Bright Hawk
Name
6265 Old Water Oak Road Suite 105
Florida street address (P.O. Box **NOT** acceptable)
Tallahassee FL 32312
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..

Bright J. Hawk
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

"MGRM" = Managing Member

none

[illegible]

ARTICLE V: Effective date, if other than the date of filing: 11/18/13. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Buzit J. Huk

(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.)

Bright D. Houk

\$ 5.00 Certificate of Status (Optional)