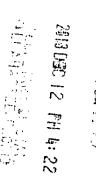
# 4/3000173969

| questor's Name)                         |  |  |  |
|---|--|--|--|
|   |  |  |  |
| trace)                                  |  |  |  |
| 11633)                                  |  |  |  |
|   |  |  |  |
| dress)                                  |  |  |  |
|   |  |  |  |
| //State/Zin/Phone                       | - #N   |  |  |
| //Otate/Zip/i none                      | <del>, π</del> )   |  |  |
| C JAZAUT                                | LT MAN   |  |  |
| ☐ WAII                                  | MAIL   |  |  |
|   |  |  |  |
| siness Entity Nan                       | ne)  |  |  |
| <b>,</b>                                | ·,   |  |  |
|   |  |  |  |
| cument Number)                          |  |  |  |
|   |  |  |  |
| Certificates                            | of Status  |  |  |
|   | <del>,</del>   |  |  |
|   |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
| DEC 1 6                                 | 2013   |  |  |
|   |  |  |  |
| A. LU                                   | 18 1   |  |  |
|   |  |  |  |
|   |  |  |  |
|   | dress)  //State/Zip/Phone  WAIT  siness Entity Nan  cument Number)  Certificates |  |  |

Office Use Only

000254581420

12/12/13--01019---009 \*\*130.00



## **COVER LETTER**

TO: Registration Section
Division of Corporations

, HERZER RENTALS 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:

| Please return all correspondence concerning this matter to the following: | •                                 |
|---|-----------------------------------|
| DOUGLAS S SWAN  |                                   |
| Name of Person  |                                   |
| HERZER RENTALS LLC  |                                   |
| Firm/Company  |                                   |
| 436 WASECA DR.  |                                   |
| Address   |                                   |
| LANTANA, FL. 33462  |                                   |
| City/State and Zip Code   | 3                                 |
| homes4rent@netzero.com  | (4) N                             |
| E-mail address: (to be used for future annual report notification)        |                                   |
| For further information concerning this matter, please call:              |                                   |
| DOUGLAS S SWAN at 561 685-7750  | स्ति 👸                            |
| Name of Person Area Code & Daytime Telephone No                           | umber                             |
| Enclosed is a check for the following amount:                             |                                   |
| <del>_</del>  | 00 Filing Fee, ficate of Status & |

# Mailing Address

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

### Street/Courier Address

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

HERZER RENTALS LLC

The name of the Limited Liability Company is:

| Principal Office Ad  | dress:   | Mailing Address:                    |                       |
|--|--|-------------------------------------|-----------------------|
| 436 WASECA DR  |  | 436 WASECA DR                       |                       |
| LANTANA, FL. 33462   |  | LANTANA, FL. 33462                  |                       |
|  | istered Agent, Registered pany cannot serve as its own Registe ve Florida registration.)   |                                     | individual or anoth   |
| The Limited Liability Combusiness entity with an action has been been been been been been been bee | pany cannot serve as its own Registe   | red Agent. You must designate an it | individual or anoth   |
| The Limited Liability Combusiness entity with an action  | pany cannot serve as its own Registerve Florida registration.)  orida street address of the re   | red Agent. You must designate an it | individual or anoth   |
| (The Limited Liability Combusiness entity with an action The name and the Flo                      | pany cannot serve as its own Registe<br>ve Florida registration.)<br>orida street address of the re<br>OUGLAS S SWAN   | red Agent. You must designate an it | individual or anoth   |
| (The Limited Liability Combusiness entity with an action The name and the Flo                      | pany cannot serve as its own Registerve Florida registration.)  orida street address of the recought of the re | red Agent. You must designate an it | individual or anoth   |
| (The Limited Liability Combusiness entity with an action of the name and the Flo                   | pany cannot serve as its own Registerve Florida registration.)  orida street address of the recought of the re | red Agent. You must designate an in | individual or another |

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

| MGR" = Manager MGRM" = Managing Member | DOUGLAS S SWAN             |            |
|--|----------------------------|------------|
| ž -                                    |                            |            |
| OGR                                    |                            | <u></u>    |
|  |                            |            |
|  | 436 WASECA DR              | FL. B      |
|  | LANTANA, FL. 33462         | 1914 N     |
|  |                            | 11.1.      |
|  |                            |            |
|  |                            | <u>○</u>   |
|  |                            | <u> </u>   |
|  |                            | •          |
|  |                            |            |
|  |                            |            |
|  |                            |            |
|  | •                          |            |
|  |                            |            |
|  |                            |            |
|  |                            |            |
|  |                            |            |
| Use attachment if necessary)           |                            |            |
| · · · · · · · · · · · · · · · · · · ·  |                            |            |
| EV: Effective date, if other than th   | e date of filing: 1/1/2014 | . (OPTIONA |
| ective date is listed, the date mus    |                            |            |
| r 90 days after the date of filing.)   | 20 30000 0201 80           |            |
| . so any a more the date of mings,     |                            |            |
|  |                            |            |
|  |                            |            |
| EQUIRED 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.)

> **DOUGLAS S SWAN** 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)