

Division of Corporations

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L14000018094

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H14000018094 3)))



H140000180943ABC.

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : MORAN, KIDD, LYONS, JOHNSON & DERKSON
Account Number : 120000000003
Phone : (407) 841-4141
Fax Number : (407) 841-4148

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
RATE MY HOA, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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JAN 24 2014
G. BRUCE

Division of Corporations

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Division of Corporations
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To:

Att: Deborah Bruce
Division of Corporations

Fax Number : ~~(850) 617-6383~~

From:

850-245-6030
Account Name : MORAN, KTDD, LYONS, JOHNSON & BERKSON, P.A.

Account Number : T200000000003

Phone : (407) 841-4141

Fax Number : (407) 841-4148

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TALLAHASSEE, FLORIDA

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

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850-617-6381

1/24/2014 9:39:18 AM PAGE 1/001 Fax Server



January 24, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RATE MY HOA, LLC
7849 COPPERFIELD COURT
ORLANDO, FL 32825

FILED
2014 JAN 23 PM 3:13
TALLAHASSEE, FLORIDA
CLERK OF THE COURT

The Articles of Organization for RATE MY HOA, LLC were filed on January 23, 2014, and assigned document number L14000012769. Please refer to this number whenever corresponding with this office.

This document was electronically received and filed under FAX audit number H14000018094.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added. It is your responsibility to remember to file your annual report in a timely manner.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Contact the IRS at 1-800-829-4933 for an SS-4 form or go to www.irs.gov.

Please be aware if the limited liability company address changes, it is the responsibility of the limited liability company to notify this office.

Should you have any questions regarding this matter, please contact this office at the address given below.

Deborah Bruce
Regulatory Specialist II
Registration/Qualification Section
Division of Corporations

Letter Number: 614A00001614

(((H14000018094 3)))

ARTICLES OF ORGANIZATION OF RATE MY HOA, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, F.S. Chapter 605, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I

Name. The name of the limited liability company shall be **RATE MY HOA, LLC** ("Company").

ARTICLE II

Address. The mailing address and street address of the principal office of the Company shall be 7849 Copperfield Court, Orlando, Florida 32825.

ARTICLE III

Duration. The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall be perpetual unless the Company is earlier dissolved as provided in the operating agreement of the Company.

ARTICLE IV

Initial Registered Office and Agent. The street address of the initial registered office of the Company is 111 North Orange Avenue, Suite 900, Orlando, FL 32801 and the name of the initial registered agent of the Company at that address is GARY M. BERKSON.

ARTICLE V

Management. The Company shall be managed by a manager or managers in accordance with an operating agreement adopted by the members for the management of the business and affairs of the Company. The operating agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the initial manager(s) of the Company is/are:

NAME

ADDRESS

KIP HUDAKOZ

7849 Copperfield Court
Orlando, FL 32825

HEIDI HUDAKOZ

7849 Copperfield Court
Orlando, FL 32825

2014 JAN 23 PM 3:43
 SECRETARY OF STATE
 PALM BEACH, FLORIDA

FILED

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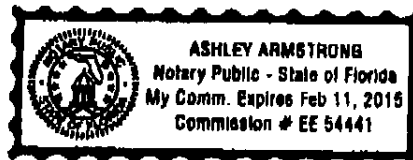
IN WITNESS WHEREOF, the undersigned does set his hand and seal and has acknowledged and filed the foregoing Articles of Organization under the laws of the State of Florida this 23rd day of January, 2014


GARY M. BERKSON
Authorized Representative

STATE OF FLORIDA
COUNTY OF Orange

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared GARY M. BERKSON, to me personally known to be the person described in and who executed the foregoing Articles of Organization and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 23rd day of January, 2014.




NOTARY PUBLIC

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2014 JAN 23 PM 3:43
CLERK OF STATE
TALLAHASSEE FLORIDA

((H14000018094 3)))

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE
UNDERSIGNED SUBMITS THE FOLLOWING STATEMENT ACCEPTING
APPOINTMENT AS REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the limited liability company is RATE MY HOA, LLC.
2. As designated in the Articles of Organization filed with this certificate, the name and the Florida street address of the registered agent is:

GARY M. BERKSON
111 North Orange Avenue, Suite 900
Orlando, Florida 32801

3. The street address of the registered office and the street address of the business office of the registered agent are identical.

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.


GARY M. BERKSON

January 21, 2014

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2014 JAN 23 PM 3:43
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TALLAHASSEE FLORIDA