L14000050020

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	, #)
PICK-UP	MAIT	MAIL
(Ві	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500258004055

03/24/14--01014--011 **125.00

EFFECTIVE DATE
4-7-14

SCANDIANTE OF STATE ALLAHASSEE, FLORIDA

MAR 2 6 2014

T. BROWN

COVER LETTER

R .		egistration (ivision of C		7	*i,		· ·
	SUBJECT	: Warrant	Construction L	LC			
			IN	iame of Lin	nited Liability Con	npany	
	The enclos	ed Articles of	of Organization a	nd fee(s) are	e submitted for fil	ing.	
	Please retu	rn all corres	pondence concern	ning this ma	atter to the followi	ng:	
		Edward H	odnovich				
					Name of Person	1	
					Firm/Company		
		7780 Link	side Loop				
					Address		
		Reunion,	FL 34747				
				C	ity/State and Zip (Code	
	Theo	5020@aol.	com E-mail address:	(to be used	l for future annual	report notification	ation)
	For further	information	concerning this	matter, plea	se call:		
	Edward F	lodnovich		at (<u>_7</u>	732 232	7665	
		Name	e of Person		Area Code	Daytime Te	lephone Number
	Enclosed is	s a check for	the following an	nount:			
7] \$125 .00 Fi	iling Fee	□\$130.00 Filir Certificate o		☐\$155.00 Filin Certified Cop (additional copy	by .	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

1.

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

ARTICLE I - Name: The name of the Limited Liability Company is:	# T
Warrant Construction LLC	8555
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7780 Linkside Loop Reunion, FL 34747	7780 Linkside Loop Reunion, FL 34747
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Fanother business entity with an active Florida registration The name and the Florida street address of the registered a Edward Hodnovich Name	Registered Agent. You must designate an individual or)
7780 Linkside Loop	
Florida street address (P.O. Box	NOT acceptable)
Reunion	FL 34747
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions o of my duties, and I am familiar with and accept the obli	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in er 605, F.S

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Page 1 of 2

(CONTINUED)

<u>l'itle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Edward Hodnovich
	7780 Linkside Loop
	Reunion, FL 34747
	
	Marine di
V: Effective date, if other than the date tive date is listed, the date must be spe	of filing: April 7, 2014 (OPTIONAL) ecific and cannot be more than five business days prior to or
V: Effective date, if other than the date etive date is listed, the date must be spefiling.)	of filing: <u>April 7. 2014</u> (OPTIONAL) ecific and cannot be more than five business days prior to or
V: Effective date, if other than the date etive date is listed, the date must be spefiling.)	ecific and cannot be more than five business days prior to or
ctive date is listed, the date must be specifiling.) VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or
V: Effective date, if other than the date etive date is listed, the date must be specifiling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a pre-	Experience of a member.
V: Effective date, if other than the date stive date is listed, the date must be specifiling.) VI: Other provisions, if any. EFOUIRED SIGNATURE: Signature of a pace (In accordance with section 60)	ecific and cannot be more than five business days prior to or Advanced to the second
V: Effective date, if other than the date stive date is listed, the date must be specifiling.) VI: Other provisions, if any. EFOUIRED SIGNATURE: Signature of a page (In accordance with section 60 constitutes an affirmation under the state of the section of t	exific and cannot be more than five business days prior to or About the period of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.
V: Effective date, if other than the date etive date is listed, the date must be specifiling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a page (In accordance with section 60 constitutes an affirmation under I am aware that any false information.	exific and cannot be more than five business days prior to or Land Cannot be more than five business days p
V: Effective date, if other than the date stive date is listed, the date must be specifiling.) VI: Other provisions, if any. EEOUIRED SIGNATURE: Signature of a page (In accordance with section 60 constitutes an affirmation under I am aware that any false information.	exific and cannot be more than five business days prior to or About the period of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.
V: Effective date, if other than the date stive date is listed, the date must be specifiling.) VI: Other provisions, if any. EEOUIRED SIGNATURE: Signature of a page (In accordance with section 60 constitutes an affirmation under I am aware that any false information constitutes a third degree felonic	ecific and cannot be more than five business days prior to or Advanced to the period of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
V: Effective date, if other than the date stive date is listed, the date must be specifiling.) VI: Other provisions, if any. EEOUIRED SIGNATURE: Signature of a page (In accordance with section 60 constitutes an affirmation under I am aware that any false information.	ecific and cannot be more than five business days prior to or Advanced to the five business days prior to or Ember or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
V: Effective date, if other than the date etive date is listed, the date must be specifiling.) VI: Other provisions, if any. Signature of a pace (In accordance with section 60 constitutes an affirmation under I am aware that any false information constitutes a third degree felonic section 4.	ecific and cannot be more than five business days prior to or Advanced to the period of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
V: Effective date, if other than the date tive date is listed, the date must be specifiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a page (In accordance with section 60 constitutes an affirmation under 1 am aware that any false information constitutes a third degree felonic constitutes at third degree felonic constitutes as the constitutes as t	ecific and cannot be more than five business days prior to or Advanced to the five business days prior to or Ember or an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)