

L14 00 01 01 008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

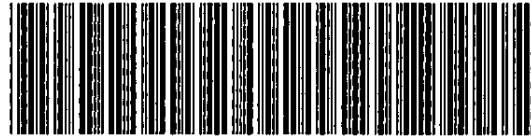
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800261320948

06/23/14--01035--008 **155.00

14 JUN 23 PM 2:53
TALLAHASSEE, FLORIDA

TROIANO & ROBERTS, P.A.

ATTORNEYS AT LAW

317 S. TENNESSEE AVENUE
LAKELAND, FLORIDA 33801-4617

D. A. TROIANO (1929-2005)
CLYDE L. ROBERTS (1927-1971)

VICTOR J. TROIANO
NICHOLAS J. TROIANO
LAURIANE CICCARELLI

TELEPHONE (863) 686-7136
FAX (863) 686-9157
WEBSITE: WWW.TROIANOLAW.COM

June 18, 2014

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Florida 32314

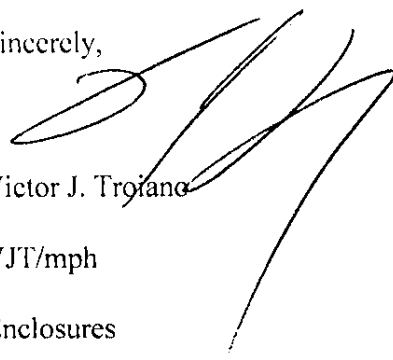
Re: Hustle 516, LLC
Our File No.: 2014-0325

Dear Sirs:

Enclosed please find the original and one copy of the Articles of Organization for the above named entity. After filing, please return a certified copy of the Articles to my office as soon as possible. I have also enclosed a check in the amount of \$155.00 to cover your filing fees, registered agent fee and the cost of obtaining a certified copy.

Thank you for your assistance in this matter. Should you have questions or comments, please contact our office.

Sincerely,


Victor J. Troiano

VJT/mph

Enclosures

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The Name of the Limited Liability Company is: Hustle 516, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company are:

a: Mailing Address: 429 E. Timberlane Office, Lakeland, Florida 33801

b: Street Address: 429 E. Timberlane Office, Lakeland, Florida 33801

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

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

DANNY M. FLING

Name

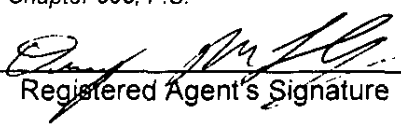
429 E. Timberlane Office

Florida street address (Post Office Box **NOT** acceptable)

Lakeland, Florida 33801

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 605, F.S.



Registered Agent's Signature

ARTICLE IV – Management (Check applicable box)

 The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company.

 X The Limited Liability Company is to be managed by one member or members and is, therefore, member - managed company.

14 JUN 23 PM 2:53
TALLAHASSEE, FLORIDA

ARTICLE V –

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

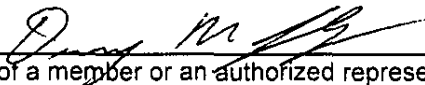
"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

"MGR"

Danny M. Fling
429 E. Timberlane Office
Lakeland, Florida 33801



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Danny M. Fling

Typed or printed name of signee

14 JUN 23 PM 2:53
TALLAHASSEE, FLORIDA