L14 000 127064

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duringer Futh Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800262744098

08/06/14--01008--016 **130.00

14 AUG - 6 AH IO: 10

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJE	CCT: Hurst Global Enterprises LLC Name of Lie	mited Liability Company	——————————————————————————————————————
The end	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please i	return all correspondence concerning this m	natter to the following:	
	Nenna B Hurst	Name of Person	
	Hurst Global Enterprises LLC	Firm/Company	
	5747 Fairchild Rd	Address	
	Crestview, FL 32539	City/State and Zip Code	
ַם.	annyhur@yahoo.com E-mail address: (to be use	d for future annual report notifica	ition)
For furt	her information concerning this matter, plea	ase call:	
Nenna	B Hurst at (:		ephone Number
_	od is a check for the following amount: D Filing Fee \$\Bigcup \\$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 Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Hurst Global Enterprises LLC (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5747 Fairchild Rd Crestview, FL 32539	5747 Fairchild Rd Crestview, FL 32539
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration. The name and the Florida street address of the registered a	egistered Agent. You must designate an individual or)
Nenna B Hurst	9
Name Name	
Nenna B Hurst 5747 Florida street address (P.O. Box)	NOT acceptable)
Crestview	FL 32539 Zip
City	Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice 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 r605, F.S
Registered Agent's Signatu	Hust
Registered Agent's Signatu	re (REQUIRED)
(CONTINUE) Page 1 of 2	D) AUG - 6
1 age 1 or 2	Marie Control of the

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
"MGR"	Nenna B Hurst
	5747 Fairchild Rd
	Crestview, FL 32539
"MGR"	Donald L Hurst
	5747 Fairchild Rd
	Crestview, FL 32539
·	
(Use attachment if necessary)	
EV: Effective date, if other than the d	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the dective date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any.	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	Specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	Specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a signature	Specific and cannot be more than five business days prior to or 90 Conna 3. Decent member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un	specific and cannot be more than five business days prior to or 90 Donna B. Would the member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in:	specific and cannot be more than five business days prior to or 90 Denna B. Yourst member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in:	specific and cannot be more than five business days prior to or 90 Donna B. Would the member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false introduced in the constitutes a third degree fermion of the constitutes at third degree fermion of the constitutes are the constitutes at the constitutes at the constitutes at the constitutes are constitutes at the constitu	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State llony as provided for in s.817.155, F.S.)
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in:	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State llony as provided for in s.817.155, F.S.)
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false into constitutes a third degree fe	specific and cannot be more than five business days prior to or 90 Decret B. Decret member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false into constitutes a third degree fe	specific and cannot be more than five business days prior to or 90 Denna B. Vourst member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State dony as provided for in s.817.155, F.S.) st Typed or printed name of signee
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a constitutes an affirmation of a constitute and any false into constitutes a third degree ferman and the section of	specific and cannot be more than five business days prior to or 90 Contact S. Deutst member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document noder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.) st Typed or printed name of signee Filing Fees:
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a constitutes an affirmation of a constitute and any false into constitutes a third degree ferman and the section of	specific and cannot be more than five business days prior to or 90 Denna B. Vourst member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State dony as provided for in s.817.155, F.S.) st Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent

Page 2 of 2

ARTICLE IV-