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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2014

DAVID MCCLYMONT 13667 LITTLE HARBOR CT JACKSONVILLE, FL 32225

SUBJECT: HARBOR POINT ENTERPRISES, LLC

Ref. Number: W14000073883

We have received your document for HARBOR POINT ENTERPRISES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 714A00026201

**TO:** Registration Section Division of Corporations

SUBJECT: Harbor Point Enterprises, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

David T. McClymont 13667 Little Harbor Court Jacksonville, FL 32225

E-mail address (to be used for future annual report notification): jfarns0819@gmail.com

For further information concerning this matter, please call:

Bryan C. Goode III at (904) 247.1755

Enclosed is a check for the following amount: \$155.00 Filing Fee and Certified Copy (additional copy is enclosed)

### **MAILING ADDRESS:**

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

## ARTICLES OF ORGANIZATION OF HARBOR POINT ENTERPRISES, LLC

### ARTICLE I - NAME

The name of the limited liability company is HARBOR POINT ENTERPRISES, LLC, ("company").

### **ARTICLE II - ADDRESS**

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

Principal Office Address:

Mailing Address:

13667 Little Harbor Court

13667 Little Harbor Court

Jacksonville, FL 32225

Jacksonville, FL 32225

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

David T. McClymont 13667 Little Harbor Court Jacksonville, FL 32225

David T. McClymont

Jacksonville, FL 32225

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

David T. McClymont

ARTICLE IV - MANAGERS OR AUTHORIZED MEMBERS

and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

The name and address of each Manager or Authorized Member is as follows:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

**MGR** 

David T. McClymont 13667 Little Harbor Court Jacksonville, FL 32225

#### ARTICLE V - OTHER MATTERS

All members shall have preemptive rights with respect to any units by the company subsequent to the date on which such member purchased his or her units. The preemptive right of each individual member shall entitle such member to purchase a percentage of the units to be issued by the company such that his or her proportionate ownership interest in the company will remain the same.

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

**REQUIRED SIGNATURE:** 

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. 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.)

David T. McClymont

Typed or printed name of signee