

L15 000106474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

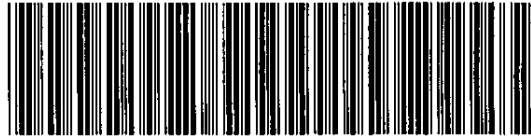
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/18/15--01026--010 \*\*125.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUN 18 PM 2:02

10-23-15 OK

**PETER A. PEAK**  
ATTORNEY AT LAW

General Practice  
Civil Litigation  
Family Law

2002 Manatee Avenue West  
Bradenton, Florida 34205  
Telephone: (941) 742-6671  
Facsimile: (941) 741-4906

June 16, 2015

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Hoof Power, LLC

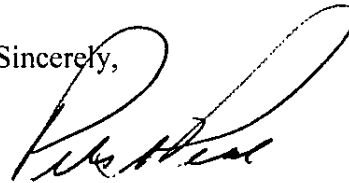
TO WHOM IT MAY CONCERN:

Enclosed please find the original Articles of Organization for Hoof Power, LLC to be submitted for filing along with my office account check in the amount of \$125.00 to cover the cost of said filing.

Also enclosed is a copy of the Articles of Organization to be certified and returned to my office at the address listed above.

Please advise if additional information is needed.

Sincerely,

A handwritten signature in black ink, appearing to read 'Peter A. Peak', written over a large, stylized loop.

Peter A. Peak

PAP:ano

Encl.

cc: Hoof Power, LLC

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** HOOF POWER, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle R. Bevelock

Name of Person

Hoof Power, LLC

Firm/Company

16125 Waterline Road

Address

Bradenton, Florida 34212

City/State and Zip Code

bevelockm@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Bevelock

941

737-8546

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$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 Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HOOF POWER, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

16125 Waterline Road  
Bradenton, Florida 34212

Mailing Address:

16125 Waterline Road  
Bradenton, Florida 34212

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Michelle Bevelock

Name

16125 Waterline Road

Florida street address (P.O. Box **NOT** acceptable)

Bradenton

Florida

34212

City

State

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 (REQUIRED)

(CONTINUED)

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15 JUN 18 PM 2:02

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Michelle Bevelock

16125 Waterline Road

Bradenton, Florida 34212

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**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.)

Michelle Bevelock

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)