## 2/5000/3759/

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STAIL BUYISION OF CORPORATION

2 08/14/15

## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJECT	Hendrix Racing LLC		
SUBJECT		Limited Liabil	ity Company
The enclos	sed Articles of Organization and fee(s)	) are submitted	for filing.
Please retu	urn all correspondence concerning this	matter to the	following:
	John M. Hendrix		
		Name of	Person
	Hendrix Racing LLC		
		Firm/Co	mpany
	5337 Florence Point Drive		
		Addı	ess
	Fernandina beach, Fl 32034		
	hendrix32034@gmail.com	City/State ar	d Zip Code
	E-mail address: (to be us	sed for future a	unual report notification)
For further i	nformation concerning this matter, plo	case call:	
	John Hendrix	904	557-1026
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	s a check for the following amount:		
\$125.00 F	iling Fee \$130,00 Filing Fee & Certificate of Status	└─¹Certifi	00 Filing Fee & \$160.00 Filing Fee, ed Copy al copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Hendrix Racing	LLC			
	end with the words "Limited L	iability Company	, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and str	eet address of the principal offi	ice of the Limited	Liability Company is:	
Principal Office Address:		Mailing Address:		
5337 Florence F	5337 Florence Point Drive		5337 Florence Point Drive	
Fernandina Bea	ch	Fern	andina Beach	
Florida 32034		Florida 32034		
	d Agent, Registered Office, &			
The Limited Liability Commother business entity with	pany cannot serve as its own R h an active Florida registration. trect address of the registered a  John M. Hendrix	egistered Agent. ' ) gent are:	nt's Signature: You must designate an individual or	
(The Limited Liability Com another business entity with	pany cannot serve as its own R h an active Florida registration. trect address of the registered a  John M. Hendrix	egistered Agent. ' )		
(The Limited Liability Com another business entity with	pany cannot serve as its own R h an active Florida registration. trect address of the registered a  John M. Hendrix	egistered Agent. ' ) gent are: Name		
(The Limited Liability Com another business entity with	pany cannot serve as its own R h an active Florida registration. trect address of the registered a  John M. Hendrix	egistered Agent. ' ) gent are:  Name	You must designate an individual or	
(The Limited Liability Com another business entity with	pany cannot serve as its own R h an active Florida registration.  treet address of the registered a  John M. Hendrix  5337 Florence Point De	egistered Agent. ' ) gent are:  Name	You must designate an individual or	

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..

(CONTINUED)

Page 1 of 2

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

constitutes a third degree felony as provided for in s.817.155, F.S.

John M. Hendrix

Typed or printed name of signee

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

## 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)

15 AUG 10 PM12: 15