

LI 6000062876

(Requestor's Name)

(Address)

---

(Address)

(City/State/Zip/Phone #)

☐ MAIL

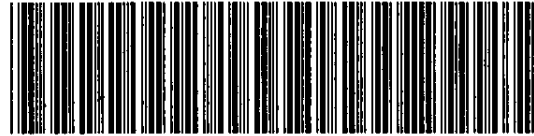
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



700283907907

04/04/16--01010 -011 \*#130.00

FILED  
16 APR -4 PM 3:34  
FBI - MEMPHIS

4/8/10

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** West Hawk Lake Enterprises  
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:

Warren Stephen Greenspoon

Name of Person

West Hawk Lake Enterprises

Firm/Company

5804 Windsor Court

Address

Boca Raton, Florida, 33496

City/State and Zip Code

wgreenspoon@mpnholdings.com

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

For further information concerning this matter, please call:

Warren Greenspoon      561      306-1764  
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**  
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

16 APR - 6 PM 3:34

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

West Hawk Lake Enterprises L.L.C.

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

FILED

16 APR -4 PM 3:34

ARTICLE II - Address:

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

Principal Office Address:

5804 Windsor Court, Boca Raton, FL, 33496

Mailing Address:

5804 Windsor Court, Boca Raton, FL,

33496

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:

Warren Greenspoon

Name

5804 Windsor Court

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

Boca Raton

FL

33496

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)

**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:**

Warren Greenspoon, 5804 Windsor Court,

Boca Raton, FL, 33496

AMBR

Monte Nathanson, 17058 Whitehaven Drive

Boca Raton, FL, 33496

AMBR

Jonathan Greenspoon, 5804 Windsor Court,

Boca Raton, FL, 33496

(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.

Upon the death of Authorized Member Monte Nathanson, his member interest in the L.L.C. will be transferred

immediately to Jonathan Greenspoon.

**REQUIRED SIGNATURE:**



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

Warren Stephen Greenspoon

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)**