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SECRETARY D. STATE

AND AREA SEEF FLORION



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Hop Stop Brewey 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:
Andrew Stephenson
The Hop Stop Brewry UC Firm/Company
2943 Mayfair Ct.
Address
Clearwater F1. 33761 City/State and Zip Code Drymmersrus abotmail. Com
City/Stale and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address New William Section New William Section

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED **ARTICLE I - Name:** The name of the Limited Liability Company is: 16 APR 25 PM 2: 45 SECRETARY OF STATE

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| SECRETAR ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address:

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:

REGISTERED AGENTS INC. Name 3030 N. Rocky Point Dr., STE 150A Florida street address (P.O. Box NOT acceptable) Tampa, FL 33607 City 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..

Bill Havre/Secretary/Registered Agents Inc.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Citle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager	SECRETARY E FALLAHASSEE
An 20	Andrew Stephenson
THOR	2943 Mayfair Lt.
	Claimater, Fl. 33761
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