

JUL/20/2016/WED 03:40 PM

FAX No.

P. 001

19/2016

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H16000173251 3)))



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16 JUL 20 PM 3:10

TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

16 JUL 20 AM 10:18

FLORIDA LIMITED LIABILITY CO.
HGB RENTALS LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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JUL 20 2017

S. GILBERT

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FAX No.

P.002

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July 20, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations
EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: HGB RENTALS LLC
REF: W16000050351

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L15000028662 (H.G.B. RENTALS).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

TANYA L HENDERSON
Regulatory Specialist II

FAX Aud. #: E16000173251
Letter Number: 116A00015173

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HGB EQUIPMENT RENTAL 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:15581 CITRUS GROVE BLVD
LOXAHATCHEE, FL 33470Mailing Address:SAME AS PRINCIPAL 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:

EXPRESS CORPORATE FILING SERVICES INC

Name

1000 PONCE DE LEON BLVD STE 105Florida street address (P.O. Box **NOT** acceptable)CORAL GABLESFL33134

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

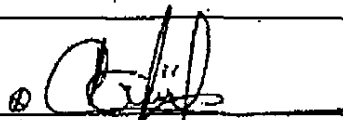
"MGR" = Manager

AMBR**Name and Address:**CARLOS HERRERA15581 CITRUS GROVE BLVDLOXAHATCHEE, FL 33470

(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 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.CARLOS HERRERA

Typed or printed name of signer