

L16000204472

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(Address)

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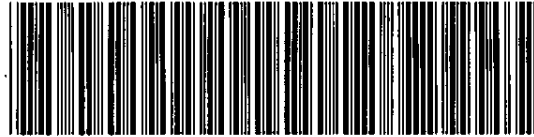
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**CORPORATE
ACCESS,
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LLC

1. HVV, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

16 JUN -7 PM 2:01
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KLEIN & KLEIN, LLC

Attorneys at Law

40 Southeast 11th Avenue

Ocala, Florida 34471

PHONE (352) 732-7750

FAX (352) 732-7754

HARVEY R. KLEIN (1922-2003)

H. RANDOLPH KLEIN

FRED N. ROBERTS, JR.

LAWRENCE C. CALLAWAY, III

November 7, 2016

**TO: Registration Section
Division of Corporation**

RE: HVV, LLC

The attached Articles of Organization and fees are submitted for filing.

The following is the email address for the LLC:

Markirvin01@gmail.com

For further information concerning this matter, please call

Joyce Henry at (352) 732-7750

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16 NOV -7 PM 2:02

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
16 NOV -7 PM 2:02
CLERK OF COURT
JANUARY 13, 2013

ARTICLE I - Name:

The name of the Limited Liability Company is:

HVV, LLC

ARTICLE II - Address:

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

Principal Office Address:

2313 East Ft. King Street, #100
Ocala, FL 34471

Mailing Address:

P. O. Box 3956
Ocala, FL 34478

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

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

MARK IRVIN
2313 East Ft. King Street, #100
Ocala, FL 34478

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, Florida Statutes.



MARK IRVIN

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

Name and Address:

"MGR"

MARK IRVIN
P. O. Box 3956
Ocala, FL 34478

"MGR"

RUTH IRVIN
P. O. Box 3956
Ocala, FL 34478

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 in s.817.155, F.S.

MARK IRVIN

Typed or printed name of signer

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