L17000010007

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	1AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Considerations to Filing Officer	
Special Instructions to Filing Officer:	



300293485023

12/28/16--01010--006 **190.00

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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	NHN New Home Network Realty LLC	Z	
SUBJEC	Name of Lim	ited Liabilit	y Company
The enclo	osed Articles of Organization and fee(s) are	submitted	or filing.
Please ret	eturn all correspondence concerning this mat	tter to the fo	llowing:
	Karla Hartwig Hasselbach		
		Name of I	erson
		Firm/Cor	many
	1770 Concordia Lake Cir #3106		4
		Addre	ss
	Cape Coral 33909		
	Ci 99317haha@gmail.com	ty/State and	Zip Code
	E-mail address: (to be used i	for future ar	nual report notification)
For further	r information concerning this matter, please	call:	
	Karla Hartwig Hasselbach 239		400 9320
	Name of Person Ar-	ea Code	Daytime Telephone Number
Enclosed	l is a check for the following amount:		
]\$125.00 I	Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \tag{2}	Certific	Filing Fee & \$160.00 Filing Fee, d Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	N I (2	Street Address New Filing Section Division of Corporations Clifton Building 661 Executive Center Circle Fallahassee, FL 32301



December 29, 2016

KARLA HARTWIG HASSELBACH 1770 CONCORDIA LAKE CIR #3106 CAPE CORAL, FL 33909

SUBJECT: NHN NEW HOME NETWORK REALTY LLC

Ref. Number: W16000086500

We have received your document for NHN NEW HOME NETWORK REALTY LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Verify the spelling of the Registered Agents address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Neysa Culligan Regulatory Specialist II

Letter Number: 116A00027623



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liabil	ity Company is:			TALL
NHN New Home N	etwork Realty LLC			<u></u>
(Must enc	with the words "Limited	Liability Compar	y, "L.L.C" or "LLC.")	So
ARTICLE II - Address: The mailing address and street	iddress of the principal of	fice of the Limite	d Liability Company is:	FE FLO
<u>Princi</u>	oal Office Address:		Mailing Address:	RATE OF
3571 North Del Pra Cape Coral, FL. 339		sar	ne	
another business entity with ar	y cannot serve as its own lactive Florida registration	Registered Agent	ent's Signature: . You must designate an individu	al or
The name and the Florida stree	address of the registered	agent are:		
	Christine Hasselbach			,
		Name		
	1770 Concordia Lacke	e Cir #3106	ı	
	Florida street address	(P.O. Box NOT	acceptable)	
	Case Const	Fi	33600	
/	City	State	35909 (` Zip	
Having been named as registered place designated in this certificat further agree to comply with the pain familiar with and accept the designation.	e, I hereby accept the appo provisions of all statutes re bligations of my position a	nintrient as registe lating to the propes to the propess registered agent of SSCO ared Agent's Sign	ered agent and agree to act in this er and complete performance of n it as provided for in Chapter 605. DEC	eapaoity. I ny duties, and I
		(CONTINUED Page 1 of 2	,	
17	70 Сонсог	-	WE CIR #	3106
C	01-14-201	7 Hassell	acel	

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Karla Hartwig Hasselbach
William	1770 Concordia Lake Cir #3106
	Cape Coral, FL, 33909
MGR	John J Smedes Jr.
MOR	851 Meridian Ave #43
	Miami Beach, FL, 33139
\$4454490419041904190419041904190419041904190	Marian
art in 1 de	
ffective date is listed, the date must be see of filing.)	te of filing: January 1, 2017 . (OPTIONAL) specific and cannot be more than five business days prior to or 90 day t meet the applicable statutory filing requirements, this date will not be
CLE V: Effective date, if other than the da ffective date is listed, the date must be see of filing.)	specific and cannot be more than five business days prior to or 90 day t meet the applicable statutory filing requirements, this date will not be l
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CLE V: Effective date, if other than the da ffective date is listed, the date must be se of filing.) If the date inserted in this block does not nument's effective date on the Department CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a r This document is exect I am aware that any fa constitutes a third degree. Christine Hasse	t meet the applicable statutory filing requirements, this date will not be not of State's records. The state of State of a member of an authorized representative of a member of an authorized representative of a member of an accordance with section 605.0203 (1) (b), Florida Statutes are felony as provided for in s.817.155, F.S.

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