

Office Use Only

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## **COVER LETTER**

	v Filing Section ision of Corporations		
SUBJECT:	Hapeehom Name of Li	e LLC mited Liability Company	
The enclosed	Articles of Organization and fee(s) a	re submitted for filing.	
Please return	all correspondence concerning this m	natter to the following:	
-	Shelly	Clark Name of Person	
-	Hapeehon	ne LLC Firm/Company	
_		Address	
-	Vero Beach	$\frac{1}{100}$ FL 329	60
	Shellycla	City/State and Zip Code  CK 530 Q Y d for future annual report notification	ahoo. Com
For further inf	ormation concerning this matter, pleas		on)
	Shelly Clark at (		55 Number
Enclosed is a	check for the following amount:		
\$125.00 Fili	ng Fee \$\int \text{S130.00 Filing Fec & Certificate of Status}\$	S155.00 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	Street Address  New Filing Section  Division of Corporation  Clifton Building	ons

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Hapeehome LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

ARTICLE 1 - Name:

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

Principal Office Address:	Mailing Address:	
21 Tarpon Drive Vero Beach	21 Tarpon Drive Vero Beach FL	
Florida 32960	33960	

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:

She	114 Cla	rK		
	Varne	<del>-</del> ,		
21 Tar	ipon Dr	ive		
Florida street address (P.O. Box NOT acceptable)				
Vero Beach	FL	32960		
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)

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## ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Men	Name and Address:
"MGR" = Manager  MGR	Shelly Clark  21 Tarpon Drive Vero Beach, FL 32960  RANISOM CLARK  21 Tarpon Drive Vero Beach, FL 32960
If an effective date is listed, the date he date of filing.)  Note: If the date inserted in this bloched document's effective date on the line.	an the date of filing: <u>January</u> /, <u>2019</u> . (OPTIONAL)  nust be specific and cannot be more than five business days prior to or 90 days after does not meet the applicable statutory filing requirements, this date will not be listed a epartment of State's records.
RTICLE VI: Other provisions, if any	
	Shelly Clark  are of a member or an authorized representative of a member.  at is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware t constitutes a	at any false information submitted in a document to the Department of State hird degree felony as provided for in s.817.155, F.S.  Shelly Clark
	Filing Fees:  cles of Organization and Designation of Registered Agent  ptional)