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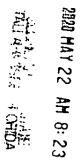
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Done Plaue!

Office Use Only



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SECRETARY OF STATI

•	COVER LI		
TO: New Filing Section Division of Corporations	e e e e e e e e e e e e e e e e e e e		*
SUBJECT: Hillip Commen	Name of Limited Li	LLC.	
The enclosed Articles of Organization	and fee(s) are submi	tted for filing.	
Please return all correspondence conce	rning this matter to t	he following:	
Rod W	oodfe,1K		
	Nam	e of Person	
	Firm	/Company	
215 W. Ca	llege Are	<u>-</u>	
	A.	ddress	
Tallahassee hilltpcommerce E-mail address	Florida	37301	
hillton	City/Stat	e and Zip Code	
E-mail address	:: (to be used for futi	re annual report notification	ation)
For further information concerning this	natter, please call:		Phase call
Red Woodfaulk Name of Person	at (<u>678</u> Area Coc) 536-880 e Daytime Telepho	9 one Number
Enclosed is a check for the following a	mount:		
□\$125.00 Filing Fee ☑\$130.00 Certificate	of Status Ce	\$155.00 Filing Fee & rtified Copy tional 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 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



215 W. COLLEGE AVE.
TALLAHASSEE, FL 32301
678.536.8819

HILLTOPCOMMERCIAL@GMAIL.COM FAX: 850.558.1360

W W W . M Y H ! L L T O P L O A N S . C O M

Florida Department of State Division of Corporations 2415 N Monroe Street, Suite 810 Tallahassee, Florida 32303

Re: Hilltop Commercial - Florida, LLC

Dear Mrs. Culligan,

We are the same officers/members in Hilltop Commercial – Florida, Inc. (Document# P18000076318) and want to also establish Hilltop Commercial – Florida, LLC.

Thanks you for your consideration.

Michaelle Cinous

Hilltop Commercial - Florida, Inc

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	2020 HAY 22 PH 3: 29
Hilltop Commercial - Florida	SECRETARY OF STATE LLC. TALLAHASSEE, FL
(Must contain the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the principal office of t	he Limited Liability Company is:
Principal Office Address:	Mailing Address:
715 W. College Are #202	Is W. College the # 202

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:

Rod Woodfer IK Name					
215 W. C.1	lege Are	# 2c Z			
Florida street address (P.O. Box NOT acceptable)					
Tallahersee	Fliride	32301			
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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Michaelle Cinous 215 W College Age # 202 Tollahossee Flore, 3230
	S
	SECRETARY OF STALLIAHASSEE.
(Use attachment if necessary)	LIAHASSEE, FL
n effective date is listed, the date must be s late of filing.)	ate of filing:
CICLE VI: Other provisions, if any.	in or state 3 records.
REQUIRED SIGNATURE:	11 Charle Priniss.
This document is exec I am aware that any fa	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes, dise information submitted in a document to the Department of State tree felony as provided for in s.817.155, F.S.
Michae	Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)