

9/15/21, 2:22 PM

Division of Corporations

L7100034252409063

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000342524 3)))



H210003425243ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.
Account Number : 075410002172
Phone : (239)344-1100
Fax Number : (239)344-1529

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: hfra@henlaw.com

**FLORIDA LIMITED LIABILITY CO.
HSLs, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

FILED
2021 SEP 15 PM 4:37
CLERK OF COURT
HALL COUNTY, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT NO.: H21000342524 3

**ARTICLES OF ORGANIZATION
OF
HSLs, LLC**

FILED
2021 SEP 15 PM 4:37
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF FLORIDA

ARTICLE I-NAME

The name of the limited liability company shall be HSLs, LLC (the "Company").

ARTICLE II-MAILING AND STREET ADDRESS

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

409 SW 3rd Court
Cape Coral, Florida 33991

ARTICLE III-EFFECTIVE DATE

This limited liability company's existence shall commence upon the filing of these Articles and shall terminate as provided for in the Operating Agreement.

ARTICLE IV-INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company are:

Name

Address

HF Registered Agents, LLC

1715 Monroe Street
Fort Myers, Florida 33901

ARTICLE V-PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

ARTICLE VI-MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company. The following are the names and addresses of the Managers who shall serve as the Managers of the Company until their successors are elected and qualified:

FAX AUDIT NO.: H21000342524 3

FAX AUDIT NO.: H21000342524 3

Name

Address

Harry H. Snell, IV

409 SW 3rd Court
Cape Coral, Florida 33991

Lorena M. Snell

409 SW 3rd Court
Cape Coral, Florida 33991

FILED
2021 SEP 15 PM 4:37
CLERK OF DISTRICT COURT
FALLA SEC. 10000

ARTICLE VII-OPERATING AGREEMENT

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned, being an authorized representative of the Members of the Company, has executed these Articles of Organization this 14 day of September 2021.



Lorena M. Snell
Authorized Representative

FAX AUDIT NO.: H21000342524 3

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: HSLS, LLC.
2. The name and address of the registered agent and office are:

HF Registered Agents, LLC
1715 Monroe Street
Fort Myers, Florida 33901

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.

HF Registered Agents, LLC

By: 

Matthew L. Brust, Vice-President

FILED
2021 SEP 15 PM 4:37
TALLAHASSEE, FLORIDA

FAX AUDIT NO.: H21000342524 3