21000473573

(Req	uestor's Name)	
(Addi	ress)	
(Addi	ress)	
(City/	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	lling Officer:	

Office Use Only

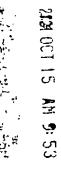
1/02/000136572

T. SCOTT NOV - 4 2021



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AM 9:49



October 14, 2021

JOHN F. CREEDON SILVERSTEIN & CREEDON 71 LEGION PARKWAY, THIRD FLOOR BROCTON, MA 02301

SUBJECT: H & E, LLC

Ref. Number: W21000136572

We have received your document for H & E, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

L05000034930-H & E LLC We do not require operating agreements.,

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Letter Number: 721A00025018

Tyrone Scott
Regulatory Specialist II
New Filings Section

SILVERSTEIN & CREEDON

ATTORNEY AT LAW
LEGION COMMONS
71 LEGION PARKWAY, THIRD FLOOR
BROCKTON, MASSACHUSETTS 02301

DAVID SILVERSTEIN 1928-1985

RALPH SILVERSTEIN SCOTT B. RUBIN JACK O. SILVERSTEIN

TELEPHONE (508) 587-0142 FAX: (508) 588-2667 1-800-752-3202 JOHN F. CREEDON JOHN T. MURPHY 1943-2020

TELEPHONE (508) 584-4088 FAX: (508) 584-7760

October 28, 2021

New Filing Section Division of Corporations Attn: Mr. Tyrone Scott P.O. Box 6327 Tallahassee, FL 32314

RE: H&E, LLC H&E BOTA, LLC

Dear Mr. Scott:

Enclosed is the revised paperwork for a new LLC filing. My client selected a new name and I made the correction in all the appropriate places. Your office retained my client's check for payment. Please, if complete and accepted, notify my office.

Also, this business entity does not intend to transact business until January 1, 2022.

If there are any questions or concerns, please contact me at my office.

Thank you.

Very truly yours,

OHN'S CREEDON

JFC: mnc Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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<u> </u>	H & E, LLG H & tain the words "Limited Liab	E BOTA, LI	LC	
(Must con	tain the words "Limited List	mity Company.	L.E.C., Of BEC.)	
ARTICLE II - Address: The mailing address and street:	address of the principal offic	e of the Limited I	Liability Company is:	
Princi	pal Office Address:		Mailing Address:	
130 Ridge Roa	d	130	Ridge Road	
130 KIUKO KOU			. 777 99/77	
Jupiter, FL	33477	<u></u>	oiter, FL 33477	
ARTICLE III - Registered A The Limited Liability Compar mother business entity with ar	ny cannot serve as its own Ke a active Florida registration.)	Registered Agen gistered Agent. Y	t's Signature: 'ou must designate an individual or	
ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, & lay cannot serve as its own Reference as its own Reference (Plorida registration.)	Registered Agen gistered Agent. Y	t's Signature: 'ou must designate an individual or	
Jupiter, FL ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & lay cannot serve as its own Reflective Florida registration.) at address of the registered agent Horacio Bot	Registered Agen gistered Agent. Y	t's Sionature:	
Jupiter, FL	gent, Registered Office, & lay cannot serve as its own Reflective Florida registration.) at address of the registered agent Horacio Bot	Registered Agent. Y gistered Agent. Y gent are: La	t's Signature: 'ou must designate an individual or	
ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, & lay cannot serve as its own Reflective Florida registration.) at address of the registered agent Horacio Bot	Registered Agent. Y gistered Agent. Y gent are: Ea Vame	t's Signature: 'ou must designate an individual or	
ARTICLE III - Registered A (The Limited Liability Compar another business entity with ar	gent, Registered Office, & by cannot serve as its own Registration.) active Florida registration.) at address of the registered agent Horacio Bot 130 Ridge	Registered Agent. Y gistered Agent. Y gent are: Ea Vame	t's Signature: 'ou must designate an individual or	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Commence of

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Membe	er
"MGR" = Manager	
AMBR	Horacio Bota
	130_Ridge_Road
	Jupiter, FL 33477
AMBR	Elizabeth_Bota
ATIDA	120 Didge Dood
	Jupiter,_FL33477
	•
(Use attachment if necessary)	
·	
ARTICLE V: Effective date, if other that	an the date of filing: January 1, 2022 (OPTIONAL)
If an effective date is listed, the date n	nust be specific and cannot be more than five business days prior to or 90 days after
he date of filing.)	this data will not be listed:
Note: If the date inserted in this block	does not meet the applicable statutory filing requirements, this date will not be listed a
the document's effective date on the De	epartment of State's records.
ARTICLE VI: Other provisions, if any.	
<u>REQUIRED</u> SIGNATURE:	
,	There Bod.
Sidonen	are of a member or an authorized representative of a member.
This documer	nt is executed in accordance with section 605.0203 (1) (b). Florida Statutes.
I am aware the	at any false information submitted in a document to the Department of State
constitutes a t	hird degree felony as provided for in s.817.155, F.S.
Н	oracio Bota
	Typed or printed name of signee

 $\frac{Filing\ Fees;}{\text{\$125.00 Filing Fee}\ for\ Articles\ of\ Organization\ and\ Designation\ of\ Registered\ Agent}$

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)