

L22 000418584

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

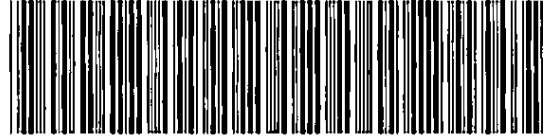
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400391232334

S. CHATHAM

SEP 28 2022

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 SEP 27 PM 3:05

RECEIVED
2022 SEP 20 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from account: 120210000160 Amount: paid 87.50 - owe 130.00= \$42.50

Authorization Signature James Fullin

Hawk and Hawk LLC

Business Name

Document #

Walk in

___ Pick up time ___

___ Mail out

___ Will wait

___ Photocopy

___ Certified Copy (s)

☒ Certificate of Status

NEW FILINGS

___ Profit

___ Not for Profit

☒ Limited Liability

___ Domestication

___ Other

___ CORP

AMMENDMENTS

___ Amendment

___ Resignation of R.A. Officer/Director

___ Change of Registered Agent

___ Revocation of Dissolution

___ Merger

___ Conversion

___ Articles of Conversion

OTHER FILINGS

___ Annual Report

___ Fictitious Name

___ ARTICLES OF CORRECTION

___ APOSTIL) _____
Country

REGISTRATION/QUALIFICATIONS

___ Foreign filing

___ Limited Partnership

___ Reinstatement

___ Other

EXAMINER'S INITIALS: _____

RECEIVED
2022 SEP 26 PM 3:26
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Hawk and Hawk, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Hawk
Name of Person

Hawk and Hawk, LLC
Firm/Company

4244 53rd Ave W Apt 2908
Address

Bradenton, FL 34210
City/State and Zip Code

Rhawk2664@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Hawk 561 260-4996
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 27, 2022

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: HANW AND HAWK LLC
Ref. Number: W22000122546

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

Did you mean "Hawk and Hawk LLC"? If so, please correct the document and resubmit it. If the name is intentional, please resubmit with the same name and we will honor the original file date.

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

Summer Chatham
Regulatory Specialist II
New Filing Section

Letter Number: 022A00021491

Filed
State and County
DIVISION OF CORPORATIONS
22 SEP 27 PM 3:05

RECEIVED
2022 SEP 27 AM 11:27
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Hawk

Hawk and Hawk, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

4244 53rd Ave W Apt 2908

Bradenton, FL 34210

Mailing Address:

4244 53rd Ave W Apt 2908

Bradenton, FL 34210

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:

Robert Hawk

Name

4244 53rd Ave W Apt 2908

Florida street address (P.O. Box **NOT** acceptable)

Bradenton

FL

34210

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.

Dr. Robert Hawk

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION
22 SEP 27 PM 3:05

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

Robert Hawk AMBR

4244 53rd Ave W Apt 2908

Bradenton, FL 34210

22 SEP 27 PM 13:09
DIVISION OF CORPORATE & FINANCIAL SERVICES
STATE OF FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Dr. Robert Hawk

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Robert Hawk

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)