

L9500000317

(Requestor's Name)

Lazan, Trute & Robbins
ATTORNEYS AND COUNSELLORS AT LAW
SUITE 802 • 1000 RANK CONCOURSE
Bay Harbor Islands, Florida 33154

OFFICE USE ONLY

000001462630
-04/21/95--01000--001
***285.00 ***285.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APR 21 AM 6:50
FILED

ARTICLES OF ORGANIZATION
OF
HOPE & GLORY, L.C.

We, the undersigned, file these articles of organization of Hope & Glory, L.C., a Florida limited liability company pursuant to Florida Statute 608 known as the Florida Limited Liability Company Act, and state as follows:

Article I
NAME

The name of the limited liability company (the "Company") formed pursuant to these articles shall be

Hope & Glory, L.C.

Article II
PERIOD OF DURATION

The period of duration of the Company shall be perpetual.

Article III
PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 1090 Kane Concourse, Suite 202, Bay Harbor Islands, Florida 33154.

Article IV
INITIAL REGISTERED AGENT

The name and street address of the Company's initial registered agent is Melvyn Trute whose business office is located at 1090 Kane Concourse, Suite 202, Bay Harbor Islands, Florida 33154.

Article V
MANAGEMENT

The management of the Company is reserved to the members and the name and addresses of the managing members are as follows:

Name	Address
Melvyn Trute	1090 Kano Concourse, Suite 202 Bay Harbor Islands, Florida 33154
David M. Lazan	5473 North Bay Road Miami Beach, Florida 33140

IN WITNESS WHEREOF, we, the undersigned, being the subscribers to these articles of organization of Hope & Glory, L.C., have herunto set our hands and seals for the purpose of forming this limited liability company under the Laws of the State of Florida, this 14th day of April, 1995.

Melvyn Trute (SEAL)
Melvyn Trute

David M. Lazan (SEAL)
David M. Lazan

STATE OF FLORIDA)
 : SS:
COUNTY OF DADE)

BEFORE ME, the undersigned authority, this day personally appeared Melvyn Trute who is personally known to me or who has produced _____ as identification and who did take an oath and David M. Lazan who is personally known to me or who has produced _____ as identification and who did take an oath, as subscribers and who acknowledged before me that they executed the foregoing Articles of Organization freely and voluntarily for the purpose therein expressed.

WITNESS my hand and official seal in the County and State named above, this 14th day of April, 1995.

Barbara L. Hunter
Notary Public, State of Florida

Barbara L. Hunter
Print Name of Notary Public

My Commission Expires:

Notary Public
STATE OF FLORIDA
My Comm Exp 8/21/95
BONDED

ACCEPTANCE OF REGISTERED AGENT

In pursuance of chapter 608.415, Florida Statutes, the following is submitted in compliance with said statute.

Melvyn Truto whose business office is located at 1090 Kane Concourse, Suite 202, Bay Harbor Islands, Florida 33154, is familiar with and accepts the obligations of and appointment as Registered Agent of Hope & Glory, L.C. and does agree to comply with the provision of the Florida Limited Liability Company Act relative to acting as registered agent for said limited liability company.



Melvyn Truto, Resident Agent

AFFIDAVIT PURSUANT TO F.S. 608.407 (2)

STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, the undersigned authority, this day personally appeared Melvyn Trute who is personally known to me or who has produced _____ as identification and who did take an oath and David M. Lazan who is personally known to me or who has produced _____ as identification and who did take an oath, and after being duly sworn, did depose and say:

1. That Hope & Glory, L.C. has at least two members.
2. The amount of the cash and a description and agreed value of property other than cash contributed by the members to Hope & Glory, L.C. is as follows:

<u>Name</u>	<u>Cash Contributed</u>	<u>Property Other Than Cash Contributed</u>
Melvyn Trute	\$ 250.00	\$ 0
David M. Lazan	\$ 250.00	\$ 0

3. The members do not anticipate contributing additional cash or property other than cash to Hope & Glory, Inc.

FURTHER YOUR AFFIANTS SAYETH NOT.

Melvyn Trute (SEAL)
Melvyn Trute
David M. Lazan (SEAL)
David M. Lazan

SWORN and SUBSCRIBED TO before me
this 18th day of April, 1995.

Brenda L. Hunter
Notary Public, State of Florida
Brenda L. Hunter
Print Name of Notary Public

My Commission Expires:

Brenda L. Hunter
Notary Public
STATE OF FLORIDA
My Comm Exp 8/21/95
BONDED

FILE NOW: Fee after May 1, will be \$263.75

L9500000317
LIMITED LIABILITY COMPANY
ANNUAL REPORT
1995
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

96 FEB -9 PM 2:41

SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILING FEE
\$ 238.75
Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

DOCUMENT #L95000000317

1. Name and Mailing Address
of Limited Liability Company

HOPE & GLORY, L.C.
1090 KANE CONCOURSE STE 202
BAY HARBOR ISLANDS FL 33154

1a. Principal Place of Business Address

1090 KANE CONCOURSE STE 202
BAY HARBOR ISLANDS FL 33154

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business

2a. Mailing Address

Building, Apt. #, etc.

Building, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified
04/21/1995

3a. State of Formation
FL

4. FET Number

☒ Applied For
☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

☐ Addendum to Fee Request ☐

7. Name and Address of Current Registered Agent

TRUTE, MELVYN
1090 KANE CONCOURSE STE 202
BAY HARBOR ISLANDS FL 33154

8. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Building, Apt. #, etc.

City

1090 KANE CONCOURSE STE 202
-02/20/96--01093--010
***238.75 ***238.75
FL Zip Code

9. Pursuant to the provisions of Sections 608.410 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)

DATE

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM TRUTE, MELVYN

1090 KANE CONCOURSE STE 202

BAY HARBOR ISLANDS FL

MGRM LAZAN, DAVID M

5473 NO. BAY ROAD

MIAMI BEACH FL

96
2/19/96

11 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

MELVYN TRUTE

2/19/96 (305) 238-6736