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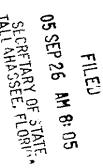
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corpor				
SUBJECT: Outdoo	r Resource Ne	etwork, LLC		
	(Name of Limited	Liability Company)		
The enclosed Articles of Or	ganization and fee(s) are su	bmitted for filing.		
Please return all correspond	lence concerning this matter	to the following:		
Bruce E. I	_oren, Esq.	Tame of Person)		
Bruce E. L	oren, P.A.	?irm/Company)		. .
301 Clem	natis Street, S			-
West Pal	m Beach, Fl			-
	(City/S	State and Zip Code)		
For further information con	cerning this matter, please o	call:	TALL	FILEU 05 SEP 26 AM 8: 05 SECRETARY OF STATE SECRETARSSEE, FLORIS
Bruce Loren, E	Esq.	at (561) 659-66		P 26
(Name of I	Person)	(Area Code & Daytime Te	lephone Number)	SEE
Enclosed is a check for the	he following amount:			F ST F L
I \$125.00 Filing Fee	3130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	**************************************
j I I	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
Outdoor Resource Network, LLC (Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC" or "LC""	
(Must end with the words "Limited Liability Company, "Limited	Company of their above viation LLC, of L.C., j	
ARTICLE II - Address:		
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
14844 Black Bear Road	14844 Black Bear Road	
Palm Beach Gardens, Florida 33418	Palm Beach Gardens, Florida 33418	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another	
The hame and the Fiorida sheet address of the re	sgistered agent are.	
Harold L. Ragan		
Name	Oad ress (P.O. Box NOT acceptable)	
14844 Black Bear Road		
Florida street address (P.O. Box NOT acceptable)		
Palm Beach Gardens,	FL 33418	
City, State, a		
Having been named as registered agent and to a	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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"M	tle: IGR" = Manager IGRM" = Managing Member	Name and Address:			
	GRM	Harold L. Ragan 14844 Black Bear Road Palm Beach Gardens, Florida 33418	 		
¥					
	-		-		
			- 		
ARTICLE	se attachment if necessary) V: Effective date, if other than the dative date is listed, the date must be says after the date of filing.)	ate of filing: (OPTIC pecific and cannot be more than five business	ONAL) days prior		
	EQUIRED SIGNATURE:		SLIGHTARY		
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)					
Harold L. Ragan Typed or printed name of signee Filing Fees:					
	LUMK LEES!				

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)