L08000064757

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only



500132063835

07/03/08--01006--007 **125.00



T. HAMPTON JUL - 3 2008

EXAMINER

COVER LETTER

Division of Corporations	
_{SUBJECT:} Seltaeb International, I	L.L.C.
	mited Liability Company)
The enclosed Articles of Organization and fee(s) a	are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Kevin D. Ferner	,
Agricultural of the state of th	(Name of Person)
	(Firm/Company)
2991 Alexis Court	
	(Address)
Tallahassee, Florida 3230	8
Control of the contro	City/State and Zip Code)
The state of the s	
For further information concerning this matter, ple	ease call:
Kevin D. Ferner	at (850 766-3509
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	the property of the second property and the
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

07/01/08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR'	П	\mathbf{L}	ΕI	- N	la	me	:		
TI				41	T	•	44.	.1	T

The name of the Limited Liability Company is:

Seltaeb International, L.L.C.

(Must end with 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:

Mailing Address:

245 Wekiva Cove

Destin, Florida 32541

2991 Alexis Court

Tallahassee, Florida 32308

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:

Kevin D. Ferner

Name

2991 Alexis Court

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

Tallahassee, Florida 3<u>2</u>308

City, State, and 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 608, F.S.

Registered Agent's Signature (REQUIRED)

.

8 JUL -3 AM 10: 3:

(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:

2991 Alexis Court Tallahassee, Florida 32308	
The same of the sa	Super and the super supe
	(Use attachment if necessary)

(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.)

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

Kevin D. Ferner

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)

08 JUL -3 AH 10: 32 ECRETARY OF STAIL LLAHASSEE FINAL