

103000023825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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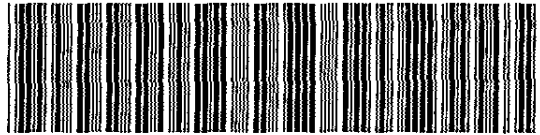
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 11, 2003

RANDALL N. THORNTON  
PO BOX 58  
LAKE PANASOFFKEE, FL 33538

SUBJECT: ULTIMATE OUTDOOR, LLC  
Ref. Number: W03000016713

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TALLAHASSEE, FLORIDA

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We have received your document for ULTIMATE OUTDOOR, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

Please return 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) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 003A00036320

**RANDALL N. THORNTON**

ATTORNEY AT LAW

POST OFFICE BOX 58

LAKE PANASOFFKEE, FLORIDA 33538

2008 NORTH C-470  
RTHORNTON@SUM.NET

(352) 793-4040  
FAX (352) 793-3845

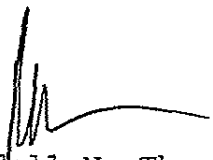
June 3, 2003

Florida Secretary of State  
New Corporations Division  
409 E. Gaines St.  
Tallahassee, Fl 32399

Re: ULTIMATE OUTDOOR, LLC

Dear Sir:

Enclosed are the Articles of Organization on the above. Please file and issue a certified copy. Enclosed is my check for \$155.00.



Randall N. Thornton

encl.

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION  
OF  
ULTIMATE OUTDOOR, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I -- NAME

The name of the limited liability company shall be  
ULTIMATE OUTDOOR, LLC ("company").

ARTICLE II -- ADDRESS

The mailing address and street address of the principal office of the company is 7275 CR 219 Wildwood, Fl 34785.

ARTICLE III -- DURATION

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these articles of organization or in the regulations.

ARTICLE IV -- REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the state of Florida are WILLIAM R. KEEN 7275 CR 219 Wildwood, Fl 34785.

ARTICLE V -- CAPITAL CONTRIBUTIONS

The members of the company shall contribute to the capital of the company the cash or property.

ARTICLE VI -- ADDITIONAL CAPITAL CONTRIBUTIONS

Each member shall make additional capital contributions to the company only on the unanimous consent of all the members, or as provided in the regulations.

ARTICLE VII -- ADMISSION OF NEW MEMBERS

Except as set forth in the regulations, no additional members shall be admitted to the company except with the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless all of the members of the company

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other than the member proposing to dispose of his or her interest approve of the proposed transfer by written consent.

ARTICLE VIII -- MEMBERS' RIGHT TO CONTINUE BUSINESS

The company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by unanimous vote of all the remaining members.

ARTICLE IX -- MANAGEMENT

The company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name and address of the initial manager of the company are WILLIAM R. KEEN 7275 CR 219 Wildwood, Fl 34785.

IN WITNESS WHEREOF, the undersigned organizers have made and subscribed these articles of organization at Lake Panasoffkee, Sumter County, Florida, on June 2, 2003

William R. Keen  
WILLIAM R. KEEN

STATE OF FLORIDA  
COUNTY OF SUMTER

2m The foregoing instrument was acknowledged before me on the 2m day of June, 2003, by WILLIAM R. KEEN.

Notary Public  
Notary Public, State of FL  
My Commission Expires: \_\_\_\_\_

Personally known ✓ or produced identification \_\_\_\_\_  
Type of identification produced \_\_\_\_\_



Randall N. Thornton  
MY COMMISSION # DD130539 EXPIRES  
July 15, 2006  
BONDED THRU TROY FAIR INSURANCE, INC.

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CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

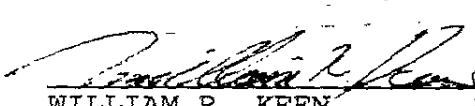
Under the provisions of F.S. 608.414 or 608.507,  
member of ULTIMATE OUTDOOR, LLC, submits the following statement to  
designate a registered office and registered agent in the state of  
Florida:

1. The name of the limited liability company is ULTIMATE  
OUTDOOR, LLC

2. The name and street address of the registered agent in  
Florida are:

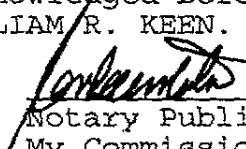
WILLIAM R. KEEN 7275 CR 219 Wildwood, FL 34785.

The undersigned, being the person named in the articles of  
organization of ULTIMATE OUTDOOR, LLC, as the registered agent of  
this limited liability company, hereby consents to accept service  
of process for the above-stated company at the place designated in  
the articles of organization, and accepts the appointment as  
registered agent and agrees to act in this capacity. The  
undersigned further agrees to comply with the provisions of all  
statutes relating to the proper and complete performance of his or  
her duties, and is familiar with and accepts the obligations of the  
position of registered agent.

  
WILLIAM R. KEEN

STATE OF FLORIDA  
COUNTY OF SUMTER

The foregoing instrument was acknowledged before me on the  
2nd day of June, 2003, by WILLIAM R. KEEN.

  
Notary Public, State of FL  
My Commission Expires: \_\_\_\_\_

Personally known        or produced identification         
Type of identification produced       



Randall N. Thornton  
MY COMMISSION # DD130539 EXPIRES  
July 15, 2006  
BONDED THRU TROY FAIN INSURANCE, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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