

LO3000024133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

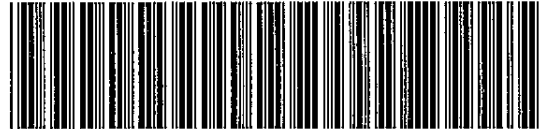
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/02/03--01013--021 **60.00

05/30/03--01061--002 **100.00

LO3-24133
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FILED

1711:27

RECEIVED

03 MAY 30 PM 1:54

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 30, 2003

JOHN DURHAM
321 SMITH ROAD
APALACHICOLA, FL 32320

SUBJECT: PRISTINE PARTNERS, L.L.C.
Ref. Number: W03000015457

We have received your document for PRISTINE PARTNERS, L.L.C. and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 403A00034170

FILED
JUN 3 2003
TALLAHASSEE, FL

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Pristine Partners, LLC
Ref. Number: W03000015457

Dear Ms. Cline,

Thank you for your letter dated May 30, 2003. Please note that my first name is James, not John. Please make this correction on the appropriate documents.

Enclosed please find an additional check in the amount of \$60 for:

- a) \$25 registered agent designation fee
- b) \$30 certified copy requested
- c) \$5 certificate of status requested

If you have any questions please call me at (850) 653-2436 or (850) 653-5193.

Thank you for your cooperation and assistance.

Sincerely,

James A. Durham
321 Smith Rd.
Apalachicola, FL 32320

RECEIVED
MAY 31 2003

RECEIVED
MAY 31 2003

RECEIVED
MAY 31 2003

John A. Durham
Requester's Name

321 Smith Road
Address

Apalachicola, FL 32320
City/State/Zip Phone #

(850)893-6565

Office Use Only

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

1. Prestine Partners, LLC
(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

☐ Profit

☐ Not for Profit

☒ Limited Liability

☐ Domestication

☐ Other

AMENDMENTS

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:
PRISTINE PARTNERS, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
321 SMITH ROAD, APALACHICOLA, FL 32320

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

JAMES A. DURHAM

Name

321 SMITH ROAD

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

APALACHICOLA

FL 32320

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

(An additional article must be added if an effective date is requested)


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.)

JAMES A. DURHAM

Typed or printed name of signee

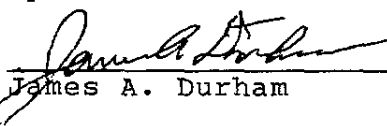
Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

ARTICLE IV - This will be a member managed Company. The managing members are as follows:

James A. Durham
321 Smith Rd.
Apalachicola, FL 32320

Richard D. Mosely
120 Old Ferry Dock Rd.
Eastpoint, FL 32328


James A. Durham


Richard D. Mosely