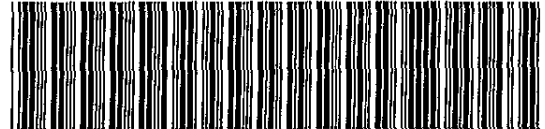


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FILED  
03 JUL 11 AM 11:44

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



000021044040

07/07/03--01048--025 \*\*150.00

07/17/03--01050--001 \*\*5.00

(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:

W03-19764

AL1

Office Use Only



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

FILED  
03 JUL 11 AM 10:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 14, 2003

BRIAN P. CLARK  
5213 RIVER PARK VILLAS DRIVE  
ST. AUGUSTINE, FL 32092

SUBJECT: AMERICAN ENDEAVORS, LLC  
Ref. Number: W03000019764

We have received your document for AMERICAN ENDEAVORS, LLC. However, the document has not been filed and is being returned 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).

There is a balance due of \$5.00.

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) 245-6094.

Agnes Lunt  
Document Specialist

Letter Number: 703A00041274

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

FILED  
03 JUL 11 AM 10:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SUBJECT:** American Endeavors, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian P. Clark  
(Name of Person)

(Firm/Company)

5213 River Park Villas Drive  
(Address)

St. Augustine, FL 32092  
(City/State and Zip Code)

For further information concerning this matter, please call:

Brian P. Clark at (904) 529-7742  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

03 JUL 11 AM 10:4

ARTICLE I - Name:

The name of the Limited Liability Company is: American Endeavors, LLC MEMBER OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

5213 River Park Villas Drive  
St. Augustine, FL 32092

- SAME -

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

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

Brian P. Clark  
Name  
5213 River Park Villas Drive  
Florida street address (P.O. Box NOT acceptable)  
St. Augustine FL 32092  
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..*

B.P. Clark  
Registered Agent's Signature

(CONTINUED)

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

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

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03 JUL 11 AM 10:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Brian P. Clark

5213 River Park Villas Drive

St. Augustine, FL 32092

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

B.P. Clark

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.)

Brian P. Clark

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)