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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

	A-LOCKMOBILE, LLC				
SUBJECT: (Name of Limited Liability Company)					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return	all correspondence concerning	this matt	er to the	following:	
Michael Ni	x				
	(Name of Person)			9	-
A-LOCKMO	OBILE, LLC	·			
	(Firm/Company)		-		
6036 Sadd	le Club Road				
	(Address)		=		
Pace, FL 3	2571				
	(City/State and Zip Code)				
For further in	formation concerning this matte	эт, please	e call:		
Michael Ni	x	at (8	50 ₎	723-6073	
	(Name of Person)	(Ar	ea Code &	Daytime Telephone Nu	mber)
STREET AI	DDRESS:	N	MAILING	G ADDRESS:	
Registration :	Section			on Section	
Division of C				f Corporations	
	99 E. Gaines Street P.O. Box 6327				
Tallahacean 1	allahassee Florida 32300 Tallahassee Florida 32314				

ARTICLES OF ORGANIZATION FOR FLÖRIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Lin A-LOCKMOBILE, Lin	mited Liability Company is:			
ARTICLE II - Ad The mailing addres		inc i pal (office of the Limited Liability Co.	mpany is:
Principal Office A	ddress:		Mailing Address:	
6036 Saddle Club R	oad		P.O. BOX 7423	
Pace, FL 32571			Panama City Beach, FL 32413	
ARTICLE III - Re	egistered Agent, Registered	Office,	, & Registered Agent's Signatur	'e:
The name and the F	lorida street address of the re	egistere	d agent are:	
	Michael Nix			,
	Name	* ****		
	6036 Saddle Club Road			
	Florida street address (P.O. Box NOT acceptable)			
	Pace, FL 32571	FL.	·-	
	City, State, a	nd Zip		
liability company a registered agent an statutes relating to	t the place designated in this o id agree to act in this capacity the proper and complete perfo	certifica . I furth ormance	rvice of process for the above state te, I hereby accept the appointmen her agree to comply with the provis e of my duties, and I am familiar w as provided for in Chapter 608, F.	t as sions of all ith and
Registered Agent's Signature				
		- ~- g		<u> </u>

Page 1 of 2

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	-
W.GKW	Michael Nix
	6036 Saddle Club Road
	Pace, FL 32571
	32.
MGR	M. Diane Nix
	6036 Saddle Club Road
	Pace, FL 32571
MGR	Mark Manning
	2132 Hentz Drive
	Panama City, FL 32405
(Use attachment if necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
REQUIRED SIGNATURE:	

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.)

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)

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