

L03000050669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

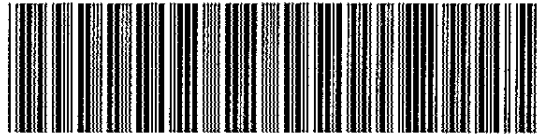
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE

12-1-03

12/02/03--01013--023 **160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC - 1 AM 10:53

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PANTHER HOLDINGS OF NORTHWEST FLORIDA, LLC
(Name of Limited Liability Company)

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

EFFECTIVE DATE

Please return all correspondence concerning this matter to the following.

12-1-03

ANTHONY L. GELCH
(Name of Person)

PANTHER HOLDINGS OF NORTHWEST FLORIDA, LLC
(Firm/Company)

P.O. BOX 424
(Address)

EASTPOINT, FL 32328
(City/State and Zip Code)

For further information concerning this matter, please call:

ANTHONY L. GELCH at (850) 670-1235
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

EFFECTIVE DATE

12-1-03

ARTICLE I - Name:

The name of the Limited Liability Company is:

PANTHER HOLDINGS OF NORTHWEST FLORIDA, LLC

ARTICLE II - Address:

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

Principal Office Address:

116 ISLAND DR.
EASTPOINT, FL
32328

Mailing Address:

P.O. BOX 424
EASTPOINT, FL
32328

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

ANTHONY L. GELCH
Name

111 PATTY LN.
Florida street address (P.O. Box NOT acceptable)

EASTPOINT FLORIDA 32328
City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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, Florida Statutes..


Registered Agent's Signature

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

ANTHONY L. GELCH
P.O. BOX 1061
EASTAVENT, FL 32328

MGR

THELISA FORD
P.O. BOX 1061
EASTAVENT, FL 32328

(Use attachment if necessary)

ARTICLE V: EFFECTIVE DATE TO BE DEC. 1, 2003

NOTE: An additional article must 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.)

ANTHONY L. GELCH

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)

03 DEC - 1 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED