# L040000/6/58

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#### TRANSMITTAL LETTER

TO: Registration Section

Division of Corporations

409 E. Gaines Street

P.O. Box 6327

Tallahassee, FL 32399

#### SUBJECT: GeoHay Industries, LLC

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

Please return all correspondence concerning this matter to the following:

#### J. MARK FISHER

(Name of Person)

LAW OFFICE OF J. MARK FISHER- Attn: Sandy

(Firm/Company)

148 Miracle Strip Pkwy, SE, Suite 2

(Address)

Ft. Walton Beach, FL 32548

(City/State and Zip Code)

For further information concerning this matter, please call:

MIKE MIKELL, JR.

(850) 685-1134

(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

ARTICLE I - Name: The name of the Limited Liability Comp	pany is: GeoHay Industries, LLC
ARTICLE II - Address:	
The mailing address and street address of	of the principal office of the Limited Liability Company
is:	
Principal Office Address:	Mailing Address:
5696 Reinke Drive	1328 N. Ferdon Blvd., #289
Crestview, FL 32539	Crestview, FL 32536
<del> </del>	
ARTICLE III - Registered Agent, Registered Agent, Registered Agent, Registered Address Name: VICTOR E. (MIKE) MIKE Address: 5696 Reinke Drive  Crestview, FL 32539  (P.O. Box NOT acceptable)	LL, JR.
stated limited liability composite accept the appointment as reasonable agree to comply with the property duties, are position as registered agent.	tered agent and to accept service of process for the above any at the place designated in this certificate, I hereby egistered agent and agree to act in this capacity. I further existence of all statutes relating to the proper and complete and I am familiar with and accept the obligations of my as provided for in Chapter 608, F.S

(CONTINUED)

### 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:
MGR	MIKE MIKELL, JR.
	5696 Reinke Drive
	Crestview, FL 32539
(Use attachment if necessary)	
NOTE: An additional article must l	be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member or an author	rized representative of a member.
(In accordance with section 608.408(3), Florida S constitutes an affirmation under the penalties of p VICTOR E. (MIK Typed or printed STATE OF FLORIDA COUNTY OF OKALOOSA	erjury that the facts stated herein are true.)  KE) MIKELL, JR.
The foregoing instrument was acknowledged by VICTOR E. (MIKE) MIKELL, JR., who is as identification and who did not take J. MARK	FISHER, NOTARY PUBLIC  J Mark Fisher  My Commission DD158800