

W4000030815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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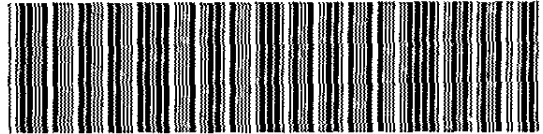
(Business Entity Name)

(Document Number)

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04 APR 22 AM 10:22
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 APR 22 AM 10:25

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WILD HERON, 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:

Thomas M. Shuler
(Name of Person)

Shuler and Shuler
(Firm/Company)

P.O. Box 850; 34-4th Street
(Address)

Apalachicola, Florida 32329
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas M. Shuler at (850) 653-9226
(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 Company is:

WILD HERON, LLC

ARTICLE II - Address:

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

Principal Office Address:

78 12th Street

Apalachicola, Florida 32320

Mailing Address:

78 12th Street

Apalachicola, Florida 32320

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

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

James R. Payton

Name

78 12th Street

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

Apalachicola FLORIDA 32320

City, State, and Zip

04 APR 22 AM 10:25

FILED
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..

James R. Payton
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

James R. Payton

78 12th Street

Apalachicola, Florida 32320

MGR

Darrell S. Ward

78-12th Street

Apalachicola, Florida 32320

MGR

1st Choice Builders

162-22nd Avenue

Apalachicola, Florida 32320

MGR

Stacy Kirvin and Elizabeth Kirvin, Husband & Wife

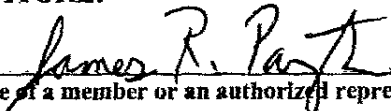
142 Deer Patch Lane

Apalachicola, Florida 32320

(Use attachment if necessary)

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.)

James R. Payton

Typed or printed name of signer

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 (CONT.)- Manager(s) or Managing Member(s):

TITLE:

MGR

NAME AND ADDRESS:

Tim Poloronis and Debbie Poloronis
Husband and Wife
227 Avenue F
Apalachicola, Florida 32320