# L040000310860

(Requestor) Name)
(Address)
(Address) Carrabelle fl 32322 (City/State/Zip/Phone #)
CLUER HANDER MAIL (Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
WD4-18885
2851
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05/17/04-01023-026 \*\*25.00





#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 17, 2004

ANNE MORGAN 114 APALACHEE ST CARRABELLE, FL 32322

# SUBJECT: THE OUTPOST REAL ESTATE AND INVESTMENTS, LLC Ref. Number: W04000018885

We have received your document for THE OUTPOST REAL ESTATE AND INVESTMENTS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or-

If you have any questions concerning the filing of your document, please cakes (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 104A00034117

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

#### ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
4576 Huy 3280	2676 Hay 2200
V-reeband CYF1.	MUES MIC HA
22-4-20	22421

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

The name and the Florida street address of the registered agent are:	SECRE VLLAY
ARUE MAROCK	EXE C
112 Amarke St	PH 12:
Florida street address (P.O. Box NOT acceptable)	OS AT
Limbelle FL 32822	A CONTRACT
City, State, and Zip	

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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.

(AND) Registered Agent' ature

(CONTINUED)

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

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

Title: Name and Address: "MGR" = Manager GRM" = Managing Member (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.) te 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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