

L04000066320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300039331543

09/09/04--U1046--015 **125.00

FILED

04 SEP -9 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

04 SEP -9 PM 2:39

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

09/09/04

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AUTAMONT INVESTMENTS, 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:

JACK C. BULLOCH
(Name of Person)

AUTAMONT INVESTMENTS, LLC
(Firm/Company)

P.O. BOX 1167
(Address)

TALLAHASSEE, FLORIDA 32302
(City/State and Zip Code)

For further information concerning this matter, please call:
(JACK C.)

CAMP BULLOCH at (850) 528-4705
(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

FILED
04 SEP -9 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AUTAMONT INVESTMENTS, LLC

ARTICLE II - Address:

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

Principal Office Address:

1546 GRAPE ST
TALLAHASSEE, FLA
32303

Mailing Address:

P.O. BOX 1167
TALLAHASSEE, FL
32302

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

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

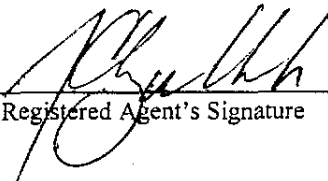
JACK C. BULLOCH
Name

1546 GRAPE ST.
Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE FL 32303
City, State, and Zip

FILED
04 SEP -9 PM 2:46
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, F.S..


Registered Agent's Signature

(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:

MGRM

JACK C. BULLOCK
1546 GRAPE ST.
TALLAHASSEE, FL 32303

MGRM

JAMES E. KINSEY
P.O. BOX 4276
TALLAHASSEE, FL 32315

MARM

STEPHEN DEMOTT
267 PINCKNEY HILL FARM
MONTICELLO, FL 32344

MGRM

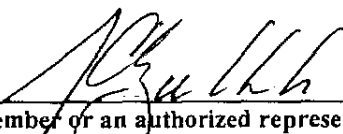
RUSSELL A. NAMRICK
1226 ADATULGE RD
LAMONT, FL 32336

04 SEP -9 PM 2:46
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.)

JACK C. BULLOCK

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)

MARM

BRYAN L. WIRICK
2668 NANTUCKET LN.
TALLAHASSEE, FL 32309

MARM

CHARLES M. CLARK
1732 AVALON RD.
LAMDONT, FL 32336

FILED

04 SEP -9 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA