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SECRETARY OF STATE  
FLORIDA



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

To: Registration Section, Limited Liability Company, Division of Corporations

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

CENTRAL FLORIDA OUTDOORS LLC  
3466 WESTFORD DRIVE  
APOPKA, FL 32712

For further information concerning this matter, please call:

Joseph R. Faber at (813) <sup>407</sup>~~666~~ 814-6985

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF  
CENTRAL FLORIDA OUTDOORS LLC**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned subscriber to this Limited Liability Company, a natural person competent to contract, hereby forms a LLC under the laws of the State of Florida.

**ARTICLE I. NAME**

The name of this LLC shall be: **CENTRAL FLORIDA OUTDOORS LLC**

**ARTICLE II. MAILING ADDRESS OF LLC**

The principal place of business and mailing address of this LLC shall be:

**CENTRAL FLORIDA OUTDOORS LLC  
3466 WESTFORD DRIVE  
APOPKA, FL 32712**

**ARTICLE III. REGISTERED AGENT**

The street address of the registered office of the LLC shall be:

**3466 WESTFORD DRIVE  
APOPKA, FL 32712**

The name of the registered agent of the LLC shall be:

**JOSEPH R FABER**

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, FS.

Signature of registered agent



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TALLAHASSEE, FLORIDA

**ARTICLE IV. MANAGER/MANAGING MEMBER**

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

Joseph R. Faber      MGR  
3466 Westford Drive  
Apopka, FL 32712

Signature:

Joseph Randall Faber

**REQUIRED SIGNATURE:**

Joseph Randall Faber  
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.)

Joseph R. Faber

Typed or printed name of signee