

LOGD00066535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

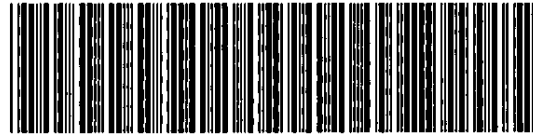
(Business Entity Name)

(Document Number)

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06 JUN 30 PM 3:11

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

2006 JUN 30 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COOPER BYRNE, PLLC	
Requestor's Name	
3520 THOMASVILLE ROAD, SUITE 200	
Address	
TALLAHASSEE, FL 32309	850-553-4300
City/State/Zip	Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. THE SAM ELLIOTT COMPANY, LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

2006 JUN 30 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

- ☒ Walk in   
 ☒ Pick up time \_\_\_\_\_   
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 ☐ Photocopy   
 ☒ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE SAM ELLIOTT COMPANY, LLC  
(Name of Limited Liability Company)

**FILED**  
2006 JUN 30 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

THOMAS A. DAVID, ESQ.

(Name of Person)

COOPER & BYRNE, PLLC

(Firm/Company)

3520 THOMASVILLE ROAD, SUITE 200

(Address)

TALLAHASSEE, FLORIDA 32309

(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS A. DAVID, ESQ.

(Name of Person)

at ( 850 ) 553-4300

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|--|

**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION**  
**OF**  
**THE SAM ELLIOTT COMPANY, LLC**

**FILED**  
2006 JUN 30 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE ONE**  
**NAME OF COMPANY**

The name of the Company is **THE SAM ELLIOTT COMPANY, LLC.**

**ARTICLE TWO**  
**PURPOSE OF COMPANY**

The purpose of the Company is to engage in any lawful act or activity for which limited liability companies may be organized.

**ARTICLE THREE**  
**PRINCIPAL OFFICE**

The address of the principal office and the mailing address shall be:


2573 BARRINGTON CIRCLE, TALLAHASSEE, FLORIDA 32308 .

**ARTICLE FOUR**  
**REGISTERED AGENT**

The name and Florida street address of the registered agent for service of process on the Company in the State of Florida are:

SAMUEL L. ELLIOTT; 2573 BARRINGTON CIRCLE, TALLAHASSEE, FLORIDA 32308.

*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

ARTICLE FIVE

MANAGEMENT

The Company is to be managed by one or more of the members unless a different method is established by the Operating Agreement for the Company.

The initial manager of the limited liability company is SAMUEL L. ELLIOTT - MGRM.

The manager is empowered to act on behalf of the company without additional signature from other organizer(s)/member(s) unless these articles are subsequently amended to reflect same.

ARTICLE SIX

ORGANIZERS-MEMBERS

The organizers/members of the limited liability company are:

SAMUEL L. ELLIOTT -	49% ownership interest
ELLIOTT & RUSSELL	
DEVELOPMENT, INC. -	51% ownership interest

The organizers will make tax elections at a later date with regard to the company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 29 day of June, 2006.

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.)

SAMUEL L. ELLIOTT

Typed or printed name of signee