

LOG000073509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

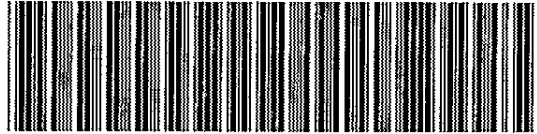
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500077883965

07/24/06--01019--012 **155.00

FILED
06 JUL 24 PM 2:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

7/25
[Signature]

Law Offices

Michael Wm Mead, P.A.

24 Walter Martin Road, Suite 3
Fort Walton Beach, Florida 32548

Telephone: (850) 243-3135
Facsimile: (850) 244-4849

Michael Wm Mead
Michael W. Mead, Jr.
John S. Mead

Please reply to:
Post Office Drawer 1329
Fort Walton Beach, FL 32549-1329

July 14, 2006

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: RED HERRING, LLC

Gentlemen:

Enclosed please find the original and one copy each of the ARTICLES OF ORGANIZATION, including the Registered Agent designation, for filing.

Please file and return a copy of the Articles to this office.

Also enclosed please find my check in the sum of \$155.00 that represents the following

Filing Fee	\$ 100.00
Registered Agent Designation	25.00
Certified Copy	30.00
TOTAL:	\$ 155.00

FILED
06 JUL 24 PM 2:48
STATE
TALLAHASSEE
FLORIDA

Thank you for your assistance in this matter.

Sincerely,



MICHAEL Wm MEAD
MWM/bjg
Enclosures: as stated

ARTICLES OF ORGANIZATION

OF

RED HERRING, LLC

ARTICLE I ~ Name

The name of the limited liability company shall be **RED HERRING, LLC.**

ARTICLE II ~ Address

The street address of the principal office of the Limited Liability Company shall be 350 West Redstone Drive, Crestview, (Okaloosa County) Florida 32536, but it shall have the power and authority to establish branch offices at such place or places as may be designated by the members.

The mailing address for the Limited Liability Company shall be the same

ARTICLE III ~ Registered Agent, Registered Office & Registered Agent's Signature

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

Charles F. Trapp
350 West Redstone Avenue
Crestview, FL 32536

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.


Charles F. Trapp

Registered Agent's Signature

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JUL 24 PM 2:48

FILED

ARTICLE IV ~ Management

- ☒ This Limited Liability Company is a member-managed company.
- ☐ This Limited Liability Company is a manager-managed company.

The name and address of each Manager ("MGR") or Managing Member ("MGRM") is as follows:

	<u>Name</u>	<u>Address</u>
MGRM:	Charles F. Trapp	350 West Redstone Avenue Crestview, FL 32536
MGRM:	David C. Adams	350 West Redstone Avenue Crestview, FL 32536
MGRM:	Thomas W. Bender	350 West Redstone Avenue Crestview, FL 32536

In accordance with §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.



Charles F. Trapp

7/14/06
Date signed

FILED
06 JUL 24 PM 2:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

STATE OF FLORIDA
COUNTY OF OKALOOSA

The foregoing instrument was acknowledged before me this 14th day of July, 2006, by **CHARLES F. TRAPP**.


Notary Public

My Commission Expires:

OR



Personally known by me



Produced _____ as identification

