L06000115497

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900082006529

12/04/06--01003--004 **160.00

SECRÉTANT OF STAT FALLAHASSEE, FLORIG

NEC -1 PM 2:

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Erosion	and Sedimentation F			
	(Name of Limited	d Liability Com	ipany)	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for fili	ing.	
Please return all corresp	ondence concerning this matte	r to the following	ng:	
Jason Cole				
	. (1	Name of Person)		
Erosion and	d Sedimentation Pro	tection		
	(Firm/Company)		
12208 Vea	al Road			
		(Address)		
Panama C	ity Florida 32404			
		State and Zip Co	ode)	
For further information	concerning this matter, please	call:		
Jason Tanton		at (850	, 6255953	3
(Name	of Person)	(Area C	ode & Daytime T	elephone Number)
Enclosed is a check for	r the following amount:			
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Co	Filing Fee & opy oy is enclosed)	✓ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Clifton 2661 E	Courier Address ration Section on of Corporation Building Executive Center assee, FL 32301	ons r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Erosion and Sedimentation Protection LLC	
(Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12208 Veal Road	12208 Veal Road
Panama City Florida	Panama City Florida
32404	32404
(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re Jason Cole Tanton	gistered agent are:
Name	PR PR
12208 Veal Road	ress (P.O. Box NOT acceptable)
Florida street addr	ress (P.O. Box NOT acceptable)
Panama City 32404	FL P
City, State, ar	ıd Zip
liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as . I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REOUIRED)

(CONTINUED)
Page 1 of 2

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" = Man "MGRM" = Man	ager anaging Member			
MGR		Jason Cole Tanton		
		12208 Veal Road		
		Panama City Florida 32404		
(Use attachmer	nt if necessary)			
(Use attachmer	•		(OPTIO)	. T. A. T. N
CLE V: Effectiv	e date, if other than the	e date of filing: ((OPTIO)	NAL) Iavs n
CLE V: Effectiv	e date, if other than the	e date of filing: (be specific and cannot be more than five bu	(OPTIO)	NAL) lays p
CLE V: Effective date is l	e date, if other than the	e date of filing: (be specific and cannot be more than five bu	(OPTIO)	NAL) lays p
CLE V: Effective date is l	e date, if other than the listed, the date must b date of filing.)	e date of filing: (oe specific and cannot be more than five bu	(OPTIO) usiness c	NAL) lays p
CLE V: Effective date is left of the days after the	e date, if other than the listed, the date must b date of filing.)	e date of filing: (se specific and cannot be more than five bu	(OPTIO) usiness o	lays p
CLE V: Effective date is left of the days after the	e date, if other than the listed, the date must be date of filing.) SIGNATURE:	e specific and cannot be more than five bu	siness o SECR TALL/	lays p
CLE V: Effective date is left of the days after the	e date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member (In accordance with see	er or an authorized representative of a member.	siness o SECR TALL/	lays p
CLE V: Effective date is left of the days after the	e date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document const	er or an authorized representative of a member.	SECRETAN TALLAHASS	lays p 06 DEC -1

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)