

L 07000681634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

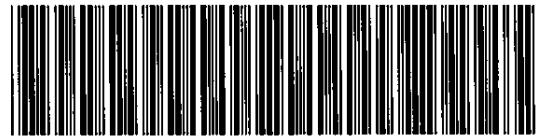
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 047041 82492A

AUTHORIZATION :

COST LIMIT : \$125.00

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TALLAHASSEE, FLORIDA

ORDER DATE : August 8, 2007

ORDER TIME : 3:39 PM

ORDER NO. : 047041-005

CUSTOMER NO: 82492A

DOMESTIC FILING

NAME: GASSAWAY OIL HUNTERS, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace - EXT. 2928

EXAMINER'S INITIALS: _____

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR
GASSAWAY OIL HUNTERS, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is: GASSAWAY OIL HUNTERS, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 505 Faulkner Street, New Smyrna Beach, FL 32168.

The undersigned has executed these Articles of Organization on this 7 day of August, 2007

Kenneth McCall

Kenneth McCall for
GASSAWAY OIL HUNTERS, LLC

STATE OF FLORIDA
COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this August 7 day of August, 2007, by Kenneth McCall, who are personally known to me or produced personally known and who did / did not take an oath.

Debra A Roth

NOTARY PUBLIC



Debra A. Roth
Commission # DD273482
Expires March 20, 2008
Debra A. Roth, Notary Public, Inc. 800-388-7010

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE AND REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

GASSAWAY OIL HUNTERS, LLC

FROM : Robert E. Kramer, Esquire

FAX NO. : 3866724410

Aug. 08 2007 01:38PM P3

2. The name and address of the registered agent and office is:

KENNETH MCCALL
505 Faulkner Street
New Smyrna Beach, FL 32188

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.

Kenneth McCall
KENNETH MCCALL

Aug. 7-2007
Date