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SECRETARY OF STATE
DIVISION OF REVENUE
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Perkins Enterprises, LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Paul Perkins
(Name of Person)

Perkins Enterprises, LLC
(Firm/Company)

3218 Purseil Lane
(Address)

Pensacola, FL 32526
(City/State and Zip Code)

For further information concerning this matter, please call:

Robyn Placek at (770) 297-9337
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy 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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR PAUL W. PERKINS ENTERPRISES,
LLC A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I.

The name of the limited liability company is Paul W. Perkins Enterprises, LLC.

ARTICLE II.

The street address of the principal office of the Limited Liability Company is:

Paul W. Perkins Enterprises, LLC
c/o Paul Perkins
3218 Pursell Lane.
Pensacola, FL 32526

The mailing address of the principal office of the Limited Liability Company is:

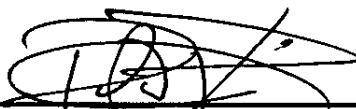
Paul W. Perkins Enterprises, LLC
c/o Paul Perkins
3218 Pursell Lane.
Pensacola, FL 32526

ARTICLE III.

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

Paul Perkins
3218 Pursell Lane
Pensacola, FL 32526

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

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DIVISION OF CORPORATIONS
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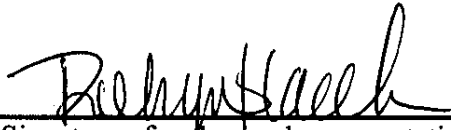
(CONTINUED)

**ARTICLES OF ORGANIZATION FOR PAUL W. PERKINS ENTERPRISES,
LLC A FLORIDA LIMITED LIABILITY COMPANY (CONTINUED)**

ARTICLE IV.

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

MGRM - Paul Perkins
3218 Pursell Lane
Pensacola, FL 32526



Signature of authorized representative of a member.

(In accordance with section 608, 408(3), Florida Statutes, the execution of this document constitutes and affirmation under the penalties of perjury that the facts stated herein are true.)

ROBYN PLACEK

Typed or printed name of signee.