

# Florida Department of State

Division of Corporations Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H070002078313)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations ...

Fax Number ... : (850) 205-0383

From:

Account Name : H. BART FLEET Account Number : I20020000170 : (850)651-4006 Phone

: (850)651-5006 Fax Number

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

AUG 28

Reclaim, LLC

Certificate of Status	0
Certified Copy	1
Page Court	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

8/17/2007

. (1

` NUG-20-2007 MON 08:28 AM FLEET SPENCER

B50-205-0381

8/20/2007 9:10

FAX NO. 850 651 5008 PAGE 001/001 Florida Pept or Brace

P. 03



August 20, 2007

FLORIDA DEPARTMENT OF STATE Division of Corporations

H. BART FLEET

SUBJECT: RECLAIM, LLC REF: W07000040494

We received your electronically transmitted document. Rowever, the condocument has not been filled. Please make the following corrections and mefax the complete document, including the electronic filling coverages.

Plorida law requires the street address of the principal office and if of different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60> days or your filing will be considered shandoned. STA

If you have any questions concerning the filing of your document, plane, eal. (850) 245-6984.

Deborah Brude Document Specialist FAR Aud. #: B07000207831 Letter Number: 707300050319 (11070002078313)

# ARTICLES OF ORGANIZATION OF RECLAIM, LLC

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida, sets forth the following:

#### ARTICLE I - NAME

The name of this limited liability company is RECLAIM, LLC (the "Company").

#### ARTICLE II - PERIOD OF DURATION

The period of duration of the Company shall be perpetual from the date of Articles with the Department of State.

# ARTICLE III - MAILING AND STREET ADDRESS OF INITIAL PRINCIPAL OFFICE OF COMPANY

The street address for the principal office of the Company is 102 Sunset Lane, Shalimar, FL 32579 and the mailing address of the initial principal office of the Company is P.O. Box 343, Shalimar, FL 32579.

#### ARTICLE IV - INITIAL REGISTERED AGENT

The name and street address of the initial registered agent in Florida for the Company is William G. Kilpatrick, Jr., Esq., whose address is 35008 Emerald Coast Parkway, Suite 203, Destin, FL 32541.

(11070002078313)

(1107000207831-3)

#### ARTICLE V - ADDITIONAL MEMBERS

An interest of a Member of the Company may only be transferred or assigned to such extent as is provided in the Operating Agreement.

#### ARTICLE VI- CONTINUITY OF BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a Member in the Company, the business of the Company shall not be continued and the Company shall be dissolved unless there is obtained within thirty (30) days thereafter the consent of all the remaining Members of the Company to a continuation thereof.

#### **ARTICLE VII- MANAGEMENT**

The Company is to be managed by a manager or managers, and is therefore a manage managed limited liability company.

#### ARTICLE VIII - AUTHORIZED REPRESENTATIVE

The name and address of the authorized representative for purposes of executing these Articles of Organization is William G. Kilpatrick, Jr., Esq., whose address is 35008 Emerald Coast Parkway, Suite 203, Destin, FL 32541.

(1107000207831-3)

IN WITNESS WHEREOF, the undersigned has executed these Articles on August 17, 2007, as the authorized representative for the Member(s) of the Company.

Bv

William G. Kilpatrick, Jr., Esq., Authorized Representative

### ACCEPTANCE BY THE REGISTERED AGENT

I, William G. Kilpatrick, Jr., Esq., hereby accept appointment as Registered Agent for the Limited Liability Company, RECLAIM, LLC, and do hereby understand and accept the obligation of the position, and acknowledge my acceptance with my signature below.

Date: August 17, 2007.

William G. Kilpatrick, Jr., Esq., Registered Agent