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(Re	questor's Name)	
(Ad	dress)	
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 (Cit	: sy/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
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SECRETARY OF STATE OF STATE OF CORPORATIONS

J. BRYAN

APR - 9 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: GA	RNER Chan (Name of Limite	d Liability Company)	
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please return all correspo	ndence concerning this matte	er to the following:	
	GARNER C	handler Name of Person)	
	`	ramo de l'ocsoriy	
		(Firm/Company)	9 H
	285 W.	(Address) WAY	OB APR
			-8 Fr. Co.
<u> </u>	RAYTON BE	ACH FL 3	2459 PH 2:38
	(City	rismo and Zip Codey	.30
For further information co	oncerning this matter, please	call:	
GARNE	Chandler	at (850) 218 (Area Code & Daytime Telep	-1020
(Name o	f Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORI	DA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	mpany, "L.L.C.," or "LLC.")
GARNER CHANDLER (Must end with the words "Limited Liability Co	mnany "I I C " or "I C ")
(Musi cild with the words Elimited Eliability Co	impany, E.E.C., or EEC.
ARTICLE II - Address: The mailing address and street address of the princip	
Principal Office Address: M	ailing Address:
DRAYTON BEACH, FL (32459	285 Wilderness Way DRAYTON BRACH, FL 32459
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its own Registered A business entity with an active Florida registration.)	
The name and the Florida street address of the regist	ered agent are:
GARNER CI	NANDLER
285 し、Vern Florida street address (P.O. Box NOT acceptable)
GRAY FON BEACH FL City, State, and Zi	
Having been named as registered agent and to accept liability company at the place designated in this congistered agent and agree to act in this capacity. If statutes relating to the proper and complete performaccept the obligations of my position as registered	ertificate, I hereby accept the appointment as arther agree to comply with the provisions of all nance of my duties, and I am familiar with and
Registered Agent's Signature (F	REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managir	ng Member	Name and Address:
MGR		GARNER Chandler 295 Wilderness Way GRAYTON BRACH, FL 3
		08
		APR - 8
(Use attachment if no		
LE V: Effective date fective date is listed, days after the date of	, if other than the the date must be of filing.)	date of filing: (OPTION e specific and cannot be more than five business d
LE V: Effective date	, if other than the the date must be of filing.)	
LE V: Effective date fective date fective date is listed, days after the date of REQUIRED SIGNA	, if other than the the date must be of filing.) ATURE:	
LE V: Effective date fective date is listed, days after the date of REQUIRED SIGNA Sig (In	, if other than the the date must be of filing.) ATURE: nature of a member accordance with seconds.	e specific and cannot be more than five business de specific and cannot be more t

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

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