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DIVISION OF CORPORATION

G. MCLEOD
MAY 1 8 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corpora				
SUBJECT: WILDMAN	ADVENTURES			· · · · · · · · · · · · · · · · · · ·
	(Name of Limited Li	авину Сотра	iny)	
The enclosed Articles of Orga	nization and fee(s) are subn	nitted for filing	<b>5</b> .	
Please return all corresponden	ce concerning this matter to	the following	:	
STELLA METI	HVIN			
	(Nam	ne of Person)		
WILDMAN AD	OVENTURES			
	(Firm	n/Company)		
122 CHERRY	TRAIL			
	(4	Address)		
PALATKA, FL	A. 32177			
	(City/Stat	te and Zip Code	)	
For further information concer	ning this matter, please call	:		
STELLA METHVIN	at (	386	972-140	5
(Name of Pers	son)	(Area Code	& Daytime Tele	phone Number)
Enclosed is a check for the	following amount:			
\$125.00 Filing Fee _ 3\$1. Ce	ertificate of Status	1155.00 Filing Certified Cop (additional copy	у	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	iling Address pistration Section ision of Corporations b. Box 6327 lahassee, FL 32314	Registration Division of Clifton Bio 2661 Execution Registration Regis	urier Address on Section of Corporations ailding cutive Center Ciee, FL 32301	irele

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
WILDMAN ADVENTURES LLC.
(Must end with the words "Limited Liahi

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:	
122 CHERRY TRAIL	122 CHERRY TRAIL	
PALATKA, FL. 32177	PALATKA, FL. 32177	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its of business entity with an active Florida registration.)	gistered Office, & Registered Agent's Si own Registered Agent. You must designate an individual	l or another
The name and the Florida street address	of the registered agent are:	HAY
STELLA METH	IVIN	5
	Name	70
122 CHERRY	TRAIL	÷
Florida	street address (P.O. Box NOT acceptable)	12
PALATKA	<sub>FL</sub> 32177	
Cit	v. State, and Zip	

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..

(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:

IANAGER	STELLA METHVIN	
	122 CHERRY TRAIL	
	PALATKA FL. 32177	
MANAGER	WILLIAM METHVIN	
	122 CHERRY TRAIL	
	PALATKA FL. 32177	
Use attachment if necessary)		
EV: Effective date, if other than the	date of filing:	(OPTIO
ective date is listed, the date must be lays after the date of filing.)	e specific and cannot be more than five	business

•

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

### STELLA METHVIN

Typed or printed name of signce

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)

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