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(1	Requestor's Name)
(,	Address)
(,	Address)
((City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(I	Business Entity Name)
(1)	Document Number)
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

A. LUNT

MAY 28 2008

EXAMINER

Office Use Only



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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Infinite	Endevors LLC		
	(Name of Limit	ted Liability Company)	
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
James Gil	tner		
		(Name of Person)	
Infinite En	ndevors		
		(Firm/Company)	
1204 Fox	Den Rd		ZEU SEU
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	(Address)	An ■
Apopka F	L 32712		Y 27 F ASSEE. F
	(Ci	ty/State and Zip Code)	
For further information	concerning this matter, pleas	e call:	3: 50 STATE LORIDA
James Giltner	•	_at (407) 493-404	6
(Name	e of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	or 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 C Tallahassee, FL 32301	
The second secon		SUP SUP HEA	;; ;
For Lather information	et wice ming this moster, plan	se culi:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Infinite Endevors LLC	
(Must end with the words 'Limit	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address o	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1204 Fox Den Rd	1204 Fox Den Rd
AI CL 00740	
Apopka FL 32712 ARTICLE III - Registered Agent, Reg	stered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Reg	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual of mothers.
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual offinother. If the registered agent are:
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual of mothers.
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ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address James Giltner 1204 Fox Den 1	stered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual of anothers of the registered agent are:
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address James Giltner 1204 Fox Den 1	stered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual of anothers of the registered agent are: Name Rd reet address (P.O. Box NOT acceptable)

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 (REQUIRED)

(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:

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
MGRM	Garth Giltner		
	1204 Fox Den Rd		
	Apopka FL 32712	· · · ·	
MGR	James Giltner		
	1204 Fox Den Rd	<u></u>	
	Apopka FL 32712	LISE "	ži
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(Use attachment if necessary)	96.50		
CLE V: Effective date, if other than the	144 -551: 03/24/08	, (ODTION	AT \
		(OPTION	,
effective date is listed, the date must be	be specific and cannot be more th	an live dusiness da	iys prio
00 days after the date of filing.)			
REQUIRED SIGNATURE:			

, DIGITIE OILL

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.)

James Giltner

Typed or printed name of signee

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)