251200000

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
·				

Office Use Only

G. MCLEOD

JUL 21 2008

EXAMINER



900132935779

07/21/08--01003--017 **160.00

RECEIVED

OBJUL 21 ANID: 45

OBJUL 21 ANID: 45

ONLYSTER OF SERVED

8 JUL 21 AMII: OC ECRETARY OF STAT LAHASSEE, FLORI

COVER LETTER

Division of Cor			•
SUBJECT: Par	Itera Ink	LLC	
	(Name of Limited	Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.	•
Please return all correspo	ondence concerning this matter	to the following:	
Donal	d Henley		
	/ (1	Name of Person)	
Pant	era Ink LL	C Sim/Company)	
	·		
18926	Blountstown	(Address)	
Tallaha	SSee, FL 3	State and Zin Code)	
	concerning this matter, please c		
Donald Ho		at (<u>850</u>) <u>556</u> (Area Code & Daytime Te	- 0843 lephone Number)
Enclosed is a check fo	r 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 Corporation Clifton Building 2661 Executive Center	is ,

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pantera 11 K LLC (Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
18926 Blountstown Hwy Tallahassee, FC 32310	18926 Blountstown HUY Tallahassee, FL 32310			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)				
The name and the Florida street address of the re	gistered agent are:			
Donald Henl	LAHE LE TO			
Name 18926 Blownts Elevida street add	Stown HW/ ress (P.O. Box NOT acceptable)			
Talla has see City, State, ar	FL 72310			
liability company at the place designated in the registered agent and agree to act in this capacital statutes relating to the proper and complete	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of experformance of my duties, and I am familiar with histories agent as provided for in Chapter 608, F.S			

(CONTINUED)

Registered Agent's Signature (RIQUIRED)

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.)

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

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)