# (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)

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EXAMINER

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AUG 182008

(Business Entity Name)

(Document Number)

Certificates of Status

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# **TRANSMITTAL LETTER**

Registration Section Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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SUBJECT: Priest Huffman Provisions, LLC

Enclosed is an original and one (1) copy of the articles of organization.

Enclosed please find a check for:

# \$ 160.00

Filing Fee, Certified Copy & Certificate of Status

From:

David L. Huffman

Priest Huffman Productions, LLC

818 West University Avenue Suite 213 Gainesville, Florida 32601

352-372-5812

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I: Name**

The name of the Limited Liability Company is:

**Priest Huffman Provisions, LLC** 

### **ARTICLE II: Address**

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

# 818 West University Avenue Suite 213 Gainesville, Florida 32601

### **ARTICLE III: Registered Agent**

The name and the Florida street address of the registered agent are:

# Sam W. Boone, Jr. 605 NE 1<sup>st</sup> Street, Suite E Gainesville, Florida 32601

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.

Registered Agent's Signature

### **ARTICLE IV: Management**

Priest Huffman Provisions, LLC is to be managed by a manager and is, therefore, a manager – managed company.

Signature of manager - Lawy C. Bruce, MGRM

818 West University Avenue, Suite 213 Gainesville, FL 32601 80

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