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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entry Name)

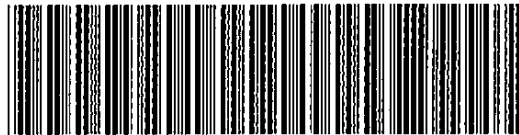
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09 JUN -5 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN
JUN -8 2009
EXAMINER

3940 N.W. 35th Place
Gainesville, FL 32606

June 4, 2009

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

Re: Southern Gold, LLC\

Gentlemen:

FILED
09 JUN -5 PM12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed herewith are two executed copies of the Articles of Organization for Florida Limited Liability Company and one executed copy of Certificate of Designation of Registered Agent/Registered Office together with a check in the amount of \$155.00 which represents the following:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$30.00 Certified Copy

Please file the enclosed documents and returned a certified copy of the Articles to me at the above address.

Yours very truly,



William J. De Carlis

Wjdc:hdc
Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Southern Gold, LLC

ARTICLE II - Address:

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

3940 N.W. 35th Place
Gainesville, FL 32606

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

William J. De Carlis

Name

3940 N.W. 35th Place

Florida street address (P.O. Box NOT acceptable)

Gainesville FL 32606

City, State, and Zip

FILED
09 JUN -5 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

William J. De Carlis

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

William J. De Carlis

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.)

William J. De Carlis

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)