L09000112351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Madie B. LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joey W. Blair
Name of Person

Firm/Company

6530 Hwy. 22e
Address

Panama City, FL 32404
City/State and Zip Code

joeyblair@knology.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joey W. Blair at (850) 871-9300
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

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

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ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
6530 Hwy. 22e Panama City, FL 32404	6530 Hwy. 22e

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Kenneth E. Blair
Name

2518 E. 15th Ct.
Florida street address (P.O. Box **NOT** acceptable)

Panama City, 32405 FL
City, 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..

Kenneth E. Blair
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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	
MGR	Joey W. Blair 219 N. Mary Ella Ave. Panama City, FL 32404
MGRM	Lynward E. Blair 3096 County Rd. 22 Headland, AL 36305
MGRM	Kenneth E. Blair 2918 E. 15th Ct. Panama City, FL 32405
MGRM	Alice G. Marshall 1534 Gainer Ave Panama City, FL 32405

(Use attachment if necessary)

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TALLAHASSEE, FLORIDA

ARTICLE V: Effective date, if other than the date of filing: 11-17-09 . (OPTIONAL)
(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.)

Joey W. Blair
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)

SEE Attachment 1

Attachment #1

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	Gregory A. Blair 4426 Tropical Dr. Panama City, FL 32404
MGRM	Gina R. Turpin 6514 Boatrace Rd Panama City, FL 32404
MGRM	
MGRM	

(Use attachment if necessary)

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Joey W. Blair
Typed or printed name of signee

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$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)