L 10000016016

(Re	questor's Name)	÷			
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	#) .			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nam	ө)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		l v			

Office Use Only



500167301405

TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTHENT OF STATE

B. KOHR

FEB 11 2010

EXAMINER

OVER 11 PM 3: 29



ACCOUNT NO. : I20000000195

REFERENCE : 281878 4306285

AUTHORIZATION :

COST LIMIT : \$15.00

ORDER DATE : February 11, 2010

ORDER TIME : 12:55 PM

ORDER NO. : 281878-005

CUSTOMER NO: 4306285

EFFECTIVE DATE:

NAME: ABOVE ALL, LLC

____ ARTICLES OF INCORPORATION

XX		TE OF LIMITE OF ORGANIZAT		RSHIP			
PLEASE	RETURN TH	E FOLLOWING	AS PROOF	OF F	ILING:		
XX	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						
CONTACI	PERSON:	Carina L. I	Dunlap - E	EXT. 2	2951		
			EXAMINE	ER'S :	INITIALS	:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Compa	ny is:			
Above All, 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:			
120 Chelveston Place	120 Chetveston Place			
Atlanta, GA 30350	Atlanta, GA 30350			
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: a Registered Agent. You must designate an individual or another			
The name and the Florida street address of	f the registered agent are:			
Corporation Service Comp	any			
1	Name			
1201 Hays Street				
Florida stre	cet address (P.O. Box <u>NOT</u> acceptable)			
Tellahaman	77761			

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.

City, State, and Zip

Corporation Service Company

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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.)

By: William Sutherland

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)