L100000 77273

(Reque	estor's Name)	
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(City/S	tate/Zip/Phon	e #)
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EXAMINER



COVER LETTER

TO: Registration Division of C		The same of the sa
	^	,,
SUBJECT:	COLA CLUB	
	Name of Limit	ed Liability Company
The enclosed Articles	of Organization and fee(s) are	submitted for filing.
Please return all corres	pondence concerning this matt	ter to the following:
	MAX	Name of Person
		Name of Person
	Col	LA CLUB LCC
		Firm/Company
	1320	O S. MONROE
4-11-11-11-11-11-11-11-11-11-11-11-11-11	1241	Address
	T .	
	I AILA	WASSEE FL 32301 y/State and Zip Code
	Cir	y/State and ZIp Code
·····	E-mail address: (to be used f	or future annual report notification)
For further information	concerning this matter, please	e call:
		at ()
Name	of Person	at ()Area Code & Daytime Telephone Number
Enclosed is a check f	or the following amount:	•
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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 FLORII	OA LIMITED LIABILI	TY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:		TY COMPANY OF SOLUTION OF SOLU
COLA CLUB LLC		强
(Must end with the words "Limited Liability Com-	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Li	
Principal Office Address: Mai	ling Address:	
1320 S. MONROE TAIMHASSEE FL 32301	1320 S. MONRO THIMHASSEE FL 32	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registered Agents) business entity with an active Florida registration.) The name and the Florida street address of the register MAX PARLEL Name	ent. You must designate an indivi	
1320 S. Moi	Roe	
	O. Box NOT acceptable)	
TANAHASSEE FL. City, State, and	3230 \ Zip	
Having been named as registered agent and to accept liability company at the place designated in this cer registered agent and agree to act in this capacity. I fur statutes relating to the proper and complete performs accept the obligations of my position as registered Registered Agent's Signature (RECONTINUEL Page 1 of 2	tificate. I hereby accept the ther agree to comply with the of my duties, and I an agent as provided for in C	e appointment as the provisions of all a familiar with and

"MGR" = Mana "MGRM" = Ma	ager anaging Member	Name and Address:
MGRM		MAX PARKER
		1320 S. MONROE
		THILAHASSEE FL 32301
	•	
<u> </u>		
	• •	
(Use attachmen LE V: Effective fective date is li days after the o	e date, if other than the isted, the date must be date of filing.)	e date of filing: (OPTION to e specific and cannot be more than five business of
LE V: Effective fective date is lidays after the o	e date, if other than the isted, the date must be date of filing.) IGNATURE:	pe specific and cannot be more than five business of
LE V: Effective fective date is lidays after the o	e date, if other than the isted, the date must be date of filing.) IGNATURE: Signature of a memb	pe specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than the specific and cannot be
LE V: Effective fective date is lidays after the o	e date, if other than the isted, the date must be date of filing.) IGNATURE: Signature of a memb	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury
LE V: Effective fective date is li days after the o	e date, if other than the isted, the date must be date of filing.) IGNATURE: Signature of a memb (In accordance with see of this document consthat the facts stated be	of or an authorized representative of a member. Section 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury crein are true.)
LE V: Effective fective date is li days after the o	e date, if other than the isted, the date must be date of filing.) IGNATURE: Signature of a memb (In accordance with see of this document const that the facts stated here.)	ever of an authorized representative of a member. Section 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury