

L10000104389

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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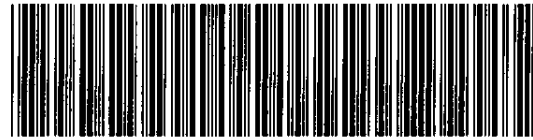
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

OCT -6 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Yukon Holdings, 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:

Jennifer Kerrigan

Name of Person

Blanco Tackabery

Firm/Company

PO Drawer 25008

Address

Winston-Salem, NC 27114-5008

City/State and Zip Code

wss@swainnet.com

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Jennifer Kerrigan

Name of Person

at ( 336 ) 293-9000

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  
OF  
YUKON HOLDINGS, LLC**

Pursuant to § 608.407 of the Florida Statutes, the undersigned does hereby submit these Articles of Organization for the purpose of forming a limited liability company and to that end set forth:

1. The name of the limited liability company is Yukon Holdings, LLC.
2. The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

5005 North Ocean Blvd.,  
Myrtle Beach, SC 29577

**Mailing Address:**

P.O. Box 71030,  
Myrtle Beach, SC 29572.

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3. The name and address of the initial registered agent is:  
CT Corporation System  
1200 South Pine Island Road,  
Plantation, Florida 33324.
4. The limited liability company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of the initial manager is:  
W. Stewart Swain  
P.O. Box 71030,  
Myrtle Beach, SC 29572

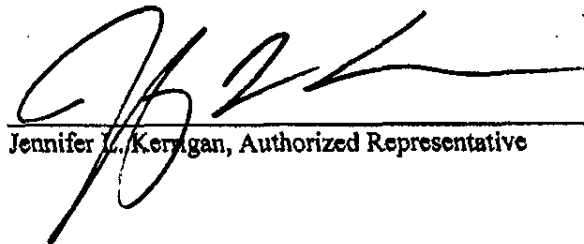
5. To the fullest extent permitted by applicable law, as it now exists or may hereafter be amended, the limited liability company shall indemnify all members and managers of the limited liability company against all liability and litigation expense, including, but not limited to, reasonable attorney's fees, arising out of their status as such or their activities in the foregoing capacity, regardless of when such status existed or activity occurred and regardless of whether or not they are members or managers of the limited liability company at the time such indemnification is sought or obtained. Without limiting the generality of the foregoing indemnity, such persons may also recover from the limited liability company all reasonable costs, expenses and attorney's fees in connection with the enforcement of rights to indemnification granted herein. The provisions of this paragraph are in addition to and not in limitation of the power of the limited liability company with respect to, and the rights of any manager or member of the limited liability company to receive the benefits of, any other or further indemnification, insurance, elimination of liability or the right or benefit which is either required by THE FLORIDA LIMITED LIABILITY COMPANY ACT or permitted thereby and duly adopted by the limited liability company in accordance therewith.

6. To the fullest extent permitted by applicable law, as it now exists or may hereafter be amended, no member or manager of the limited liability company shall have any personal liability arising out of any action, whether by or in the right of the limited liability company or otherwise, for monetary damages for breach of his or her duty as a manager or member. This paragraph shall not impair any right to receive indemnity or insurance from the limited liability company or any third party which any member or manager may now or hereafter have. Any repeal or modification of this paragraph shall not impair or otherwise adversely affect any limitation on, or elimination of, the personal liability of a member or manager effected hereby with respect to acts or omissions occurring prior to such repeal or modification.

7. These Articles will be effective upon filing.

**Signature Page Follows**

This the 4<sup>th</sup> day of October, 2010

  
Jennifer L. Kerrigan, Authorized Representative

*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 appointments as registered agent and agree to act in this capacity. I further agree to comply with the provision 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.*

**CT Corporation System**

By:   
Registered Agent's Signature

Ternell Kearney Asst. Secretary

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