

#L11000006936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

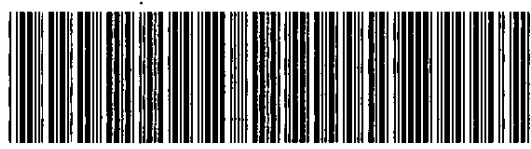
(Business Entity Name)

(Document Number)

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FILED  
11 JAN 14 AM 11:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
JAN 18 2011

## COVER LETTER

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

**SUBJECT: Malt Life, 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:

Alan F. Scott, Jr.

Name of Person

Scott & Company, P.A.

Firm/Company

2440 SE Federal Hwy., Suite A

Address

Stuart, FL 34994

City/State and zip code

iamalanfscott@hotmail.com

E-Mail Address

For further information concerning this matter, please call:

Alan F. Scott, Jr

Name of Person

at (772) 463-2555

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    \$160.00 Filing Fee, Certificate of Status & Certified Copy

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

FILED  
11 JAN 14 AM 11:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I-Name:**

The name of the Limited Liability Company is:

**Malt Life, LLC**

**ARTICLE II-Address:**

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

**Principal Office Address:**

1441 N. Alternate A1A  
Jupiter, FL 33469

**Mailing Address:**

1441 N. Alternate A1A  
Jupiter, FL 33469

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

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

Alan F. Scott, Jr., Esq.

Name

2440 SE Federal Highway, Suite A

Florida street address

Stuart, FL 34994

City, State and Zip

Having been named as registered agent 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.

  
Registered Agent's Signature (REQUIRED)

**Article IV-Manager or managing Member(s):**

**Title:**

**Name and Address:**

MGRM

Gunnar Askeland  
1396 SW Palm City Rd.  
Stuart, FL 34994

MGRM

Mark Haskell  
3108 SE Monroe St.  
Stuart, FL 34997

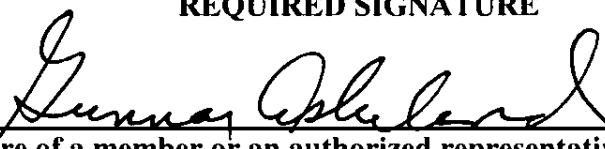
MGRM

Larry E. Doss  
18741 SE River Ridge Rd.  
Tequesta, FL 33469

MGRM

Alan F. Scott, Jr.  
2440 SE Federal Highway, Suite A  
Stuart, FL 34994

**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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in S.817.155, F. S.