## 1100003113

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03/11/11--01018--002 \*\*125.00

EFFECTIVE DATE 03-13-11

TAPLAN OF STATE

B. BOSTICK
MAR 1 4 2011
EXAMINER

## **COVER LETTER**

TO: Registration Division of C		<b>*</b>		
் திரும் ஆம்மான் மும்	theAtor Vest Syste	ems LLC		
SUBJECT: Break		ed Liability Company		
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.		
Please return all corres	pondence concerning this matte	er to the following:		
David E.	Cowgill			
		Name of Person		
		Firm/Company		
117 Dow	ning Street			
100		Address	ALL SEC	
Panama C	ity, Florida 12413		AR AR	6,236
divordávo1	Gity 313@gmail.com	/State and Zip Code	SSE	رسمت المسترا
ulverdave	E-mail address: (to be used for	or future annual report notification)		_ 📜
For further information	n concerning this matter, please	call:	4 3: 47 FLORID	_
David E. Cowgi		at ( 850 ) 527 9124	<i>&gt;</i>	
Namo	e of Person	Area Code & Daytime Telep	ohone Number	
Enclosed is a check t	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 Ci Tallahassee, FL 32301	ircle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BreatheAtor Vest System (Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address o	f the principal office of the Limited Liability Compa	ıny i
Principal Office Address:	Mailing Address:	
117 Downing Street	117 Downing Street	
Panama City, Florida 32413	Panama City, Florida 32413	

David E. Cowgill

Name

117 Downing Street

Florida street address (P.O. Box NOT acceptable)

Panama City

FL 32413

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

Registered Agent's Signature (RECUIRED)

(CONTINUED)

Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member MGR	David E. Carrell	
INOL	David E. Cowgill  117 Downing Street	
	Panama City, Florida 32413	
		₹
<del></del>		
		1885 1885 1
		me a
		FLO :
		RATE 46
		<del></del>
(Use attachment if necessary)		
IF V. Effective data if other than the	ne date of filing: March 13, 2011	(ODTION
	be specific and cannot be more than 1	

**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.)

David E. Cowgill

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)