[11000/a1010

(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Nan	ne)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ing Officer:	
		ļ

Office Use Only



500213349385

10/24/11--01029--007 **125.00

RECEIVED

11 DCI 24 PH 1: 35

UNISION OF A SPANTONS

TALLED ASSESS FOR THE PROPERTY OF THE PRO

HOCT 24 PM 1: 43

J. BRYAN

OCT 24 2011

CVANINER

COVER LETTER

TO:

TO: Registration Division of	n Section Corporations		
SUBJECT: Goos	e One, LLC		
	Name of Limited	Liability Company	
The enclosed Article	es of Organization and fee(s) are sub	omitted for filing.	FEE S T
Please return all corr	espondence concerning this matter	to the following:	124 # 1
Don Odha	ım		
	Na	ame of Person	70.4
Goose Or	ne, LLC		
	Fi	irm/Company	- age gr
4544 Gro	ve Park Drive		
<u> </u>		Address	
Tallahasse	e, FL 32311		
	City/S	tate and Zip Code	
dodham@			
	E-mail address: (to be used for	future annual report notification)	
For further informati	on concerning this matter, please ca	all:	
Don Odham		850 212-0201	
Na	me of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	k 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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITE	D LIABILITY, COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	The state of the s
Goose One, LLC	
(Must end with the words "Limited Liability Company, "L.L.C.," o	r"LLC.") 但(*)
ARTICLE II - Address: The mailing address and street address of the principal office of the	E Limited Liability Company is:
Principal Office Address: Mailing Address	<u>s:</u>
4544 Grove Park Drive Tallahassee, FL 32311 Tallahassee, FL	
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered Agent. You must de business entity with an active Florida registration.)	red Agent's Signature: signate an individual or another
The name and the Florida street address of the registered agent are	:
Donald T. Odham	
Name	
4544 Grove Park Drive	
Florida street address (P.O. Box NOT a	cceptable)
Tallahassee _{FL} 32311	
City, State, and Zip	
Having been named as registered agent and to accept service of pre- liability company at the place designated in this certificate, I her registered agent and agree to act in this capacity. I further agree to statutes relating to the proper and complete performance of my du accept the obligations of my position as registered agent as prov	eby accept the appointment as comply with the provisions of all ties, and I am familiar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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	Name and Address: Donald T. Odham 4544 Grove Park Drive Tallahassee, FL 32311
	Tallahassee, FL 32311
	
	
(Use attachment if necessary)	
LEV: Effective date if other than the	date of filing: (OPTION.
ffective date is listed, the date must b	e specific and cannot be more than five business da
days after the date of filing.)	-
REQUIRED SIGNATURE:	
DEALIDED SIZNIATIDE.	

(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.)

Donald T. Odham

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)