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OR OF THE CORPORATIONS

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SECRETARY OF STATE
PALLAHASSEE, FLERING.

J. BRYAN

OCT 31 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Division of C	Section Corporations		
SUBJECT:	Outdoor Build Name of Limited	Ling Product	ts
The enclosed Articles	of Organization and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	nomas S S	stewart ame of Person	
			SE 1
<u> 208</u>	Mill Creel	rm/Company	OCT 31
Crav		Address  A 32327 tate and Zip Code	
Scott S	F-mail address: (to be used for	future annual report notification)	
For further information	n concerning this matter, please ca	all:	
Thomas C	coff Stewart a	t ( <u>850</u> ) <u>728 - 8</u> Area Code & Daytime Tele	
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 C Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Outdoor Building Pro (Must end with the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
208 Mill Creek rd Crawfordville, FIA 32327	208 Mill Creek rd Crawfordville, FIA 32327
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ed Agent. You must designate an individual or another
Thomas S Stormas S S S S S S S S S S S S S S S S S S S	ewart  Yd  SS (P.O. Box NOT acceptable)  FL 32327
liability company at the place designated in thi	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all

Registered Agent's Signature (REQUIRED)

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..

(CONTINUED)

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

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

MGRM	Thomas Scott Stewart 208 Mill Creek ra
	Crawfordville, Fin 32327
	A so
	S. S
(Use attachment if necessary)	
LEV: Effective date, if other than the	e date of filing: (OPTIONA
ffective date is listed, the date must b days after the date of filing.)	pe specific and cannot be more than five business day

EQUIRED 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.)

Thomas Scott Stewart
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)