L12000018306

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800219071518

01/24/12--01018--017 **155.00

TO FEB - C DM 2: 12

FEB F7 2012 T. HAMPTON

COVER LETTER

	on Section of Corporations	
SUBJECT:	Eagles In Fligh	nt Agricultural, LLC
	Name of Limit	ted Liability Company
The enclosed Artic	les of Organization and fee(s) are	submitted for filing.
Please return all co.	rrespondence concerning this mat	tter to the following:
	Bishop E	Edward C. Brown
	e e	Name of Person
	Eagles in Fi	light Agricultural, LLC Firm/Company
	585	5 Ingram Rd.
		Address
	Apopka	a, Florida 32703
		ity/State and Zip Code
		Iltural@gmx.com for future annual report notification)
For further informa	tion concerning this matter, pleas	se call:
Mr. Edv	vard C. Brown	at (904) 206-8582
N	ame of Person	Area Code & Daytime Telephone Number
Enclosed is a chec	ck for the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee Certified Copy (additional copy is enclosed) 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

12 FEB -6 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 25, 2012

EDWARD C GROWN 5855 INGRAM RD APOPKA, FL 32703

SUBJECT: EAGLES IN FLIGHT AGRICULTURAL, LLC

Ref. Number: W12000004835

We have received your document for EAGLES IN FLIGHT AGRICULTURAL, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The designation of the registered agent must be at a Florida street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 912A00002004

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Egglog In Elight Agri	oultural III C	
Eagles In Flight Agri (Must end with the words "Limited Liabili		
(Must eng with the words Elithied Elabili	ry Company, E.L.C., or ELC.	
ARTICLE II - Address:		•
The mailing address and street address of the pri	incipal office of the Limited Liability Co	mpany is:
Principal Office Address:	Mailing Address:	
5855 Ingram Rd	5855 Ingram Rd	
Apopka, Florida	Apopka, Florida	
32703	32703	
business entity with an active Florida registration.) The name and the Florida street address of the re	egistered agent are:	
Edward C.	Brown	
Name		
6060 US?	1 South	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	
St. Augustine	_{FL} 32086	
City, Sta	te, and Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered Agent's Signature.	his certificate, I hereby accept the appoints of I further agree to comply with the provi- informance of my duties, and I am familiar itered agent as provided for in Chapter 60 of the complete of the comp	ment as sions of all with and
(CONTINI	U ED)	OR MA
Page 1 of 2		STATE BRATIOHS 3: 42

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

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

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	Edward C.Brown	
	6060 US1 South St. Augustine, FL 32086	
	St. Adgustine, FL 32000	
MGRM	Ginger K. Brown	
	6060 US1 South	
	St. Augustine, FL 32086	
MGRM	Dr. Kenneth Day	
INGINIA	10521 SW 166th Street	
	Miami, Florida 33157	
MGRM	Dr. Eddie Sturgis	
	17101 Rose Hollow	
	Edmond, OK 73012	
(Use attachment if necessary)		
	the date of filing: (OPTIONAL)	
	t be specific and cannot be more than five business days prior	r
or 90 days after the date of filing.)		
REQUIRED SIGNATURE:		
	The state of the s	

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.)

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)

Eagles In Flight Agricultural, LLC. Continued Managing Member/Member List

Title:	Name and Address
MGRM	Dr. Patrick T. Lucas
	5A Braddock Lane Unit A
	Palm Coast, Florida 32137
MGRM	Dr. Sidney Reid
	5855 Ingram Rd
	Apopka, FL 32703