

L12000027097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

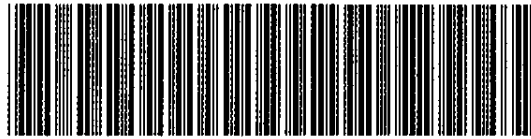
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DATE 02/21/2012



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 27 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ancient Badger LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Walter Holloway
Name of Person

Firm/Company

3773 Indian River Dr.
Address

Cocoa FL 32926
City/State and Zip Code

epiowaty@gmail.com
E-mail address: (to be used for future annual report notification)

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TALLHASSEE, FLORIDA

For further information concerning this matter, please call:

Walter Holloway at (**321**) **639-6421**
Name of Person 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 (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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ancient Badger LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

3773 Indian River Dr.
Cocoa FL 32926

3773 Indian River Dr.
Cocoa FL 32926

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or a business entity with an active Florida registration.)

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

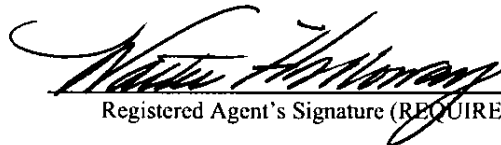
Walter Holloway
Name

3773 Indian River Dr
Florida street address (P.O. Box NOT acceptable)

Cocoa FL 32926
City, State, and Zip

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TALLAHASSEE, FLORIDA

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

EFFECTIVE DATE 02/21/12

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Walter Holloway
3773 Indian River Dr
Cocoa FL 32926

MGRM

Elizabeth Piowaty
3773 Indian River Dr
Cocoa FL 32926

MGRM

Neil Holloway
3773 Indian River Dr
Cocoa FL 32926

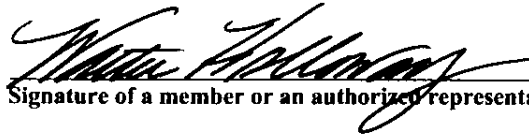
MGRM

Cole Holloway
3773 Indian River Dr
Cocoa FL 32926

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 21 February 2012 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Walter Holloway

Typed or printed name of signee

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TALLAHASSEE, FLORIDA
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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)