## L12-00124703

| (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: |
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T. CLINE

OCT - 4 2012

EXAMINER

## COVER LETTER

| TO:     |  |   |  | •                          |  |
|---------|--|---|--|----------------------------|--|
| CLIDIO  | r corr.  | Pilot Prod                                    | cessina. LLC                                 |                            |  |
| SUBJ    | ECI:   |   |  |                            |  |
| The en  | iclosed Articles   | of Organization and fee(s) are subr           | nitted for filing.                           |                            |  |
| Please  | return all corres  | spondence concerning this matter to           | the following:                               |                            |  |
|         |  | · · · · · · · · · · · · · · · · · · ·         |  |                            |  |
|         | Division of Corporations  UBJECT: Pilot Processing, LLC  Name of Limited Liability Company  the enclosed Articles of Organization and fee(s) are submitted for filing.  lease return all correspondence concerning this matter to the following:  William Jones  Name of Person  Pilot Processing, LLC  Firm/Company  124 Falkirk St.  Address  Fort Myers Beach, FL 33931  City/State and Zip Code  billiones 756@gmail.com  E-mail address: (to be used for future annual report notification)  William Jones  Name of Person  Name of Person  Name of Person  Name of Person  Area Code & Daytime Telephone Number  William Jones  Status  Certified Copy (additional copy is enclosed)  Mailing Address Registration Section Division of Corporations P.O. Box 6327  Street/Courier Address Registration Section Division of Corporations P.O. Box 6327  Street/Courier Address Registration Section Division of Corporations P.O. Box 6327  Street/Courier Address Registration Section Division of Corporations Clifton Building Street/Courier Address Registration Section Division of Corporations Clifton Building Street/Courier Address Registration Section Division of Corporations Clifton Building Street/Courier Address Registration Section Division of Corporations Clifton Building Street/Courier Address Registration Section Division of Corporations Clifton Building Street/Courier Address Registration Section Division of Corporations Clifton Building |   |  |                            |  |
|         |  | Pilot Pro                                     | cessing, LLC                                 |                            |  |
|         |  | Fin   | m/Company                                    |                            | <u> </u>   |
|         |  | 124   | Falkirk St.                                  |                            |  |
|         |  |   | Address                                      |                            |  |
|         |  | Fort Myers E                                  | Beach, FL 33931                              |                            |  |
|         |  |   |  |                            | S 10   |
|         |  |   |  |                            |  |
|         |  | E-mail address: (to be used for it            | iture annual report notification             | )                          |  |
| For fu  | rther information  | n concerning this matter, please cal          | 1:   |                            | SSE<br>SSE<br>SSE  |
|         | Will   | iam Jones at                                  | , 239  | 209 4964                   |  |
|         | Nam  | e of Person                                   | Area Code & Daytime T                        | clephone Number            | DRIDE PRODUCTION TO THE PRODUC |
| Enclo   | sed is a check   | for the following amount:                     |  |                            | 77.**  |
| 3125.00 | O Filing Fee   |   | Certified Copy                               | Certificate<br>Certified ( | e of Status &<br>Copy  |
|         |  | Registration Section Division of Corporations | Registration Section Division of Corporation | ons                        |  |

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:  |   |
|--|---|
| Pilot Process  | ing, LLC  |
| (Must end with the words "Limited Liabili  | ty Company, "L.L.C.," or "LLC.")                        |
| ARTICLE II - Address: The mailing address and street address of the pri  | incipal office of the Limited Liability Company is:     |
| Principal Office Address:  | Mailing Address:  |
| 124 Falkirk St. Fort Myers Beach, FL 33931   | 124 Falkirk St.<br>Fort Myers Beach, FL 33931           |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration. | ered Agent. You must designate an individual or another |
| 5 A 7 11 1   |   |

| William J          | lones                                 |
|--------------------|---------------------------------------|
| Name               |                                       |
| 124 Falk           | irk St.                               |
| Florida street add | ress (P.O. Box <u>NOT</u> acceptable) |
| Fort Myers Beach   | <sub>FL</sub> 33931                   |

City, State, and Zip

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.

egistered Agent's Signature (REQUIRED)

(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:

| Use attachment if necessary)  LE V: Effective date, if other than the date of filing:  ective date is listed, the date must be specific and cannot be more than five days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member or an authorizer representative of a member of a memb |             |                                       |
|--|-------------|---------------------------------------|
| Use attachment if necessary)  LEV: Effective date, if other than the date of filing:  ective date is listed, the date must be specific and cannot be more than five days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member of a member of an authorized representative of a member of a member or an authorized representative of a member of a member of a member of perjury that the facts stated he I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S.)  William Jones   | ones        |                                       |
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| William Jones  | ion of this | nis document<br>herein are true.      |
|  | he Departi  | mion of State                         |
|  | he Departi  | mon or suite                          |
| Filing Fees:   | he Departi  | — <sub>5</sub>                        |
|  | he Departi  | — <sub>5</sub>                        |
| \$125,00 Filing Fee for Articles of Organization and Designation of Registered Agent   | he Departi  | SECRETA<br>FALLAHAS                   |
| \$ 30.00 Certified Copy (Optional)   | he Departi  | — <sub>5</sub>                        |