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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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12 MUV -1 THIZE SECRETARY ALLAHASSEE, FLO

B. BOSTICK
NOV - 1 2012
EXAMINER

COVER LETTER

TO: Registratio Division of	n Section Corporations		·
SUBJECT: LU	SSC// NAVIS	LL C iability Company	
The enclosed Article	s of Organization and fee(s) are subn	nitted for filing.	
Please return all corre	espondence concerning this matter to	the following:	
Aus	sell DAVIS		
, 0	Nan	ne of Person	
	Fire	n/Company	
イフグ	7	O > —	
137	I homy son	Address	
Talla	Casser 7/1	, 32312	. AE SE 12
100114	City/Sta	te and Zip Code	AL OV
	E-mail address: (to be used for fu	ture annual report notification)	S I
For further information	on concerning this matter, please call	l:	
	at	()	2 39 LORI
Nar	ne of Person	Area Code & Daytime Telep	ohone 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	Street/Courier Address Registration Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	·
	Tallahassee, FL 32314	2661 Executive Center C	ircle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must end with the words "Limited Liability	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
137 Thompson dir.	SAMC	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individ	dual or another
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individ	

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)

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGRM" = Managing Member	Resulf Wain 130 thom ton Cur vallatures of to. 323/2
	12 NOV - 1
	PM 12: 39 LEFT LORIDA
(Use attachment if necessary)	. •
LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONA oe specific and cannot be more than five business day
REQUIRED SIGNATURE:	
Aund	er or an authorized representative of a member.

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

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)