

#L12000161350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL.

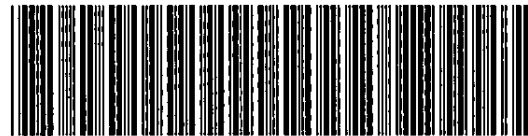
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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EFFECTIVE DATE
1-1-2013

12/26/12--01019--009 **125.00

FILED
12 DEC 26 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
DEC 28 2012

SELLERS, TAYLOR & MORRISON, P.A.

108 WEST HOWARD STREET
LIVE OAK, FLORIDA 32064

ERNEST A. SELLERS
LUCAS J. TAYLOR
ADAM L. MORRISON

TELEPHONE
386/208-1080

FACSIMILE
386/208-1090

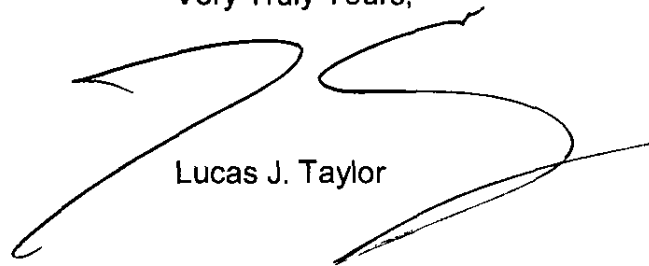
December 21, 2012

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I represent John Myers. Please find enclosed the Articles of Organization and filing fee to establish John Myers Amusements, LLC. Please contact me at the above phone number if any other documents or information is required. Thank you for your time and consideration.

Very Truly Yours,

A large, stylized handwritten signature in black ink, consisting of a large 'L' and 'J' followed by a horizontal line and a final flourish.

Lucas J. Taylor

LJT/tk
Enclosure

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE
1-1-2013

John Myers Amusements, 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:

1445 SW Main Blvd.
Ste. 105
Lake City, FL 32025

Mailing Address:

1445 SW Main Blvd.
Ste. 105
Lake City, FL 32025

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 another business entity with an active Florida registration.)

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

John Myers
Name
1445 SW Main Blvd., Ste. 105
Florida street address (P.O. Box **NOT** acceptable)
Lake City FL 32025
City, State, and Zip

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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..

John Myers

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

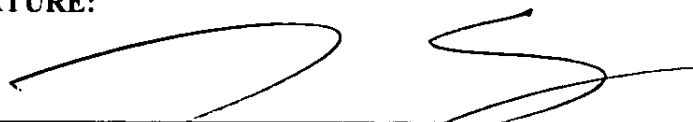
MGR

John Myers
1445 SW Main Blvd., Ste. 105
Lake City, FL 32025

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 2, 2013 (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.)

Lucas J. Taylor
Typed or printed name of signer

Representative/attorney
for John Myers

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)