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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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SEGNETARY OF STATE PACUAHASSEE FLORIDA

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'AUG 2 2 2013

D. BRUCE

COVER LETTER

SUBJECT:	Adventure Name of Limit	Investment Group, LLC ed Liability Company		
The enclosed Article	s of Organization and fee(s) are	submitted for filing.		
Please return all corr	espondence concerning this mat	ter to the following:		
		Randy Shackley Name of Person		 -
		Firm/Company		
		492 Hickory Ave	ALCAH AHA	2013 AUG 2
	Cit	Orange City, FL 32763	ARY OF	
*	l'Ano E-mail address: (to be used	dy.brightway@yahoo.com for fixure annual report notification)		PM 12: 3
For further informati	on concerning this matter, pleas		; 1 ≯(*1	33
Nan	Randy_Shackley ne of Person	at (386) 956-91 Area Code & Daytime Tele	30phone 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)	S160.00 Filing Fee Certificate of Statu Certified Copy (additional copy is enc	ıs &
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	s	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Fl. 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Adventure Ir	evestment Group, LLC	
	nited Liability Company, "L.L.C.," or "LLC.")	***************************************
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
492 Hickory Ave	492 Hickory Ave	
	TITICKULY AVC	
Orange City, FL 32763	Orange City, FL 32763	Signature:
Orange City, FL 32763 ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	Orange City, FL 32763 egistered Office, & Registered Agent's own Registered Agent. You must designate an indivision of the registered agent are:	
Orange City, FL 32763	Orange City, FL 32763 egistered Office, & Registered Agent's own Registered Agent. You must designate an indivi	AUG 21 AHETARY
Orange City, FL 32763 ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	Orange City, FL 32763 egistered Office, & Registered Agent's own Registered Agent. You must designate an indivision of the registered agent are: Randy Shackley Name	AUG 21 AHETARY
Orange City, FL 32763 ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	Orange City, FL 32763 egistered Office, & Registered Agent's own Registered Agent. You must designate an indiviso of the registered agent are: Randy Shackley	

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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Randy Shackley 492 Hickory Ave Orange City, FL 32763 MGRM Todd Pope 75 Utah Place Palm Coast, FL 32164 **MGRM** Jay Froehlich 1295 Ocean Shore Blvd Unit 2010 Ormond Beach, FL 32176 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (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 prepriet of 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.)

Randy Shackley

Typed or printed name of signee

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
S 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)