## #13000121319

(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:
·

Office Use Only



800251054068

08/26/13--01024--013 \*\*130.00

13 AUG 26 PN 3+31.
SECRETARY OF STATE
FALL AHASSEF FLORIDA

K. SALY EXAMINER AUG 27 2013

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: GPS Coaching, LLC  Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Eve Charlene Mack Name of Person	
GPS Coachings LLC Firm/Company	
13800 Panama City Beach Phuy, Suite 100.	<u>-0</u> # 208
Panama City Beach, FL 32407 City/State and Zip Code  GPS COOCH @ COMMONTH NOT	
GPS COACH & COMCAST, Net E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
EV2 Mack at (770) 298 · 2909  Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee Certificate of Status  □\$155.00 Filing Fee Certificate of Status  □\$155.00 Filing Fee Certificate Opy (additional copy is enclosed)  □\$160.00 Filing Fee Certificate of Status  Certificate Opy (additional copy is enclosed)	atus &
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

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:
The second se
(Must end with the words "Limited Liability Company, "L.L.C.," or "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:
13800 Panama City Beach PKW/ 13800 Panama City Beach PKW/ Suite 106-0 # 208  Panama City Beach, Fl 32407 Panama City Beach, Fl. 32407
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:
Eve Mack Name
Name
13800 Panama City Beach Pkwy, Suite 106-0#20 Florida street address (P.O. Box NOT acceptable)
Panama City Bactil 32407 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
Eve macr

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

IIN ACCIDIL — Managara	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
Widning Winner	
•	
(Use attachment if necessary)  CLE V: Effective date, if other that	in the date of filing: (OPTIONAL)
effective date is listed, the date to or 90 days after the date of filing	must be specific and cannot be more than five business day ng.)
REQUIRED SIGNATURE:	
Eve	ember or an authorized representative of a member.
Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false in the section of the secti	ember or an authorized representative of a member.  on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State
Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false it constitutes a third degree	ember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false it constitutes a third degree	on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)

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