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Division of Corporations

Fax Number : (850)617-6383

From:

: MCFARLAND, GODLD, LYONS, SULLIVAN & HOGAN, P.A. Account Name

Account Number : I19990000015 Phone : (727)461-1111 Fax Number : (727) 461-6430

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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## FLORIDA LIMITED LIABILITY CO. FLORAL CITY OUTDOOR ADVENTURES, LLC

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Sewing The Dampa Bay Area For Nearly 60 Years

DONAMO O. MCFARLAND GARY W.LYONS\*/ CHUCK A. SULLIVAN\*1+/ ELWOOD HOGAN, JR. / PHILIP G. DRAGONETTI A HARMONY J. WIOMAN

REPLY TO: MAIN OFFICE 311 South Missouri Avenue Clearwater, Florida 33756 Telephone (727) 461-1111 Facsimile (727) 461-6430 www.mcfarlandgouldlaw.com

East Lake Office 3490 East Lake Road, Suite B Palm Harbor, FL 34685 Telephone (727) 771-8900

> ED SUAREZ Of Council

MARLA ARONSON SCHERKER Of Counsel

eerReviewRated

Certified Arbitrator

† Member Multi-Million Dollar Advocates Forum

Board Certified Criminal That Amorney
 Florids Supreme Court Cardified Clarette Court Medianty
 AV Raced Accounty

March 11, 2014

#### TRANSMITTAL BY EMAIL

Florida Department of State Division of Corporations Attn: Teresa Brown

RE:

Floral City Outdoor Adventures, LLC

Ref: W14000015027

Fax Aud. #H14000056741

Dear Ms. Brown:

Pursuant to your letter of March 11th, please find attached our revised Articles of Organization with regard to the above. If approved, please file accordingly.

Please call with any questions and/or concerns to same.

Legal Assistant to,

Gary W. Lyons, Esquire

truly yours,

LS Enclosures

P:Mocs/CLIENTS/47500-47999/47802.10 FlorelCityOctdoorAdvantures,LLC-CorporateOuteraNatter state 031114.wpd

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March 10, 2014

FLORIDA DEPARTMENT OF STATE

MCFARLAND, GOULE, LYONS, SULLIVAN & HOGAN, T.A.

SUBJECT: FLORAL CITY OUTDOOR ADVENTURES, LLC

REF: W14000015027

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please  $call\ (850)\ 245-6051.$ 

Teresa Brown Regulatory Specialist II

FAX Aud. #: H14000056741 Letter Number: 814A00005105

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March 11, 2014

FLORIDA DEPARTMENT OF STATE

MCFARLAND, GOULE, LYONS, SULLIVAN & HOGAN, P.A.

SUBJECT: FLORAL CITY OUTDOOR ADVENTURES, LLC

REF: W14000015027

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown Regulatory Specialist II FAX Aud. #: H14000056741 Letter Number: 914A00005250

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### ARTICLES OF ORGANIZATION

## FOR FLORIDA LIMITED LIABILITY COMPANY OF

### FLORAL CITY OUTDOOR ADVENTURES, LLC

### ARTICLE I: NAME AND MAILING ADDRESS

The name of the Limited Liability Company is FLORAL CITY OUTDOOR ADVENTURES, LLC, and its principal office is 10654 E. Gobbler Drive, Floral City, Florida 34436 and mailing address is 1538 85th Avenue North, St. Petersburg FL 33702.

# ARTICLE II: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

Gary W. Lyons, Esquire 311 South Missouri Avenue Clearwater, Florida 33756

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. Ifurther 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 605, F.S.

ARTICLE III - MANAGEMENT

This Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed Company. The initial Managers shall be Patricia Kovack-Tezzas at 1538 85th Avenue North, St. Petersburg FL 33702 and James M. Tezzas at 1538 85th Avenue North, St. Petersburg FL 33702. Either one of the Managers shall be authorized to sign and bind the Company in all Company matters.

Prepared By:
McFarland, Gould, Lyons,
Sullivan & Hogan, P.A.
Gary W. Lyons, Esq.
FBN: 0268186
311 S. Missouri Avenue
Clearwater, Fl 33756
(727) 461-1111

IN WITNESS WHERE Organization for Florida Limit	EOF, the undersigned have executed these Articles of ed Liability Company this day of March,
• •	The state of the s
2014.	
	( And I want to be a second to be a
•	Tatta No. 1. barren
•	PATRICIA KOVACK-TEZZAS
	Titled: Authorized member
	Titlett. Authorized member
•	a m/m
•	PAMES M. TEZZAS
	Titleds Anthonismd months

(In accordance with section 605.0203 (1)(b), 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.)