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B. BOSTICK MAY 27 2014

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: South Walton Outdoor, LLC. Name of Lin	nited Liability Company	
The enclosed Articles of Organization and fee(s) a	re submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Nancy Olivotti	Name of Person	
	Firm/Company	
40B Jacksons Run		
	Address	
Santa Rosa Beach, FL 32459	City/State and Zip Code	
southwaltonoutdoor@gmail.com E-mail address: (to be use	d for future annual report notification)	¢.
For further information concerning this matter, plea	ase call:	. 1
Nancy Olivotti at ()	256) 665-7593 STATES CODE Daytime Telephone Number	
Enclosed is a check for the following amount: \$\Bigsim \frac{1}{2} \\$125.00 \text{ Filing Fee & Certificate of Status}\$	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy Certificate of Status &	
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)	l)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

- copy - w/o signature

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
South Walton Outdoor, LLC. (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
40B Jacksons Run Santa Rosa Beach, FL 32459	PO Box 6255 Miramar Beach, Ft. 32550	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an individual o	or =1
The name and the Florida street address of the registered a		- []
Registered Agent Solutions, Inc. Name		en e
155 Office Plaza Drive Suite A Florida street address (P.O. Box N		
Tallahassee, FL 32301 City	FL Zip	
Having been named as registered agent and to accept serve the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig Chapter	the appointment as registered agent and agree to act i fall statutes relating to the proper and complete perfo	in this rmano
	see signed	
Registered Agent's Signatu	re (REQUIRED) acpey.	
(CONTINUE)	9	

Page 1 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
South Walton Outdoor, LLC.	11 W. 42
(Must end with the words "Limited I	Liability Company, "L.IC.," or "LLC,")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
40B Jacksons Run Santa Rosa Beach, FL 32459	PO Box 6255 Miramar Beach, FL 32550
The Limited Liability Company cannot serve as its own Function business entity with an active Florida registration. The name and the Florida street address of the registered a Registered Agent Solutions. In Name	.) agent are:
165 Office Plaza Drive Suite A	
155 Office Plaza Drive Suite A Florida street address (P.O. Box	
Tallanassee, FL 32301	
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obli- Chapte	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this full statutes relating to the proper and complete performance gations of my provided for in ar 605, F.S 2014 Mbogo, Asst. Secretary are (REODIRED)
Prese Lof2	

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<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR 15%	Nancy Olivotti
	40B Jacksons Run
	Santa Rosa Beach, FL 32459
AMBR 35%	Dennis Graham
	122 Seascape Drive Unit 1110
	Miramar Beach, FL 32550
AMBR 35%	James Kelly
	122 Seascape Drive Unit 1110
	Miramar Beach, FL 32550
AMBR 15%	Donna Kelly
	122 Seascape Drive Unit 1110
	Miramar Beach, FL 32550
effective date is listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 9
TCLE V: Effective date, if other than the date in effective date is listed, the date must be splate of filing.) TCLE VI: Other provisions, if any.	
TICLE V: Effective date, if other than the date in effective date is listed, the date must be splate of filing.) TICLE VI: Other provisions, if any. member can sell their percentage of the REQUIRED SIGNATURE:	becific and cannot be more than five business days prior to or 9 business upon approval by all members.
TCLE V: Effective date, if other than the date in effective date is listed, the date must be splate of filing.) TICLE VI: Other provisions, if any. member can sell their percentage of the REQUIRED SIGNATURE:	business upon approval by all members.
TCLE V: Effective date, if other than the date in effective date is listed, the date must be splate of filing.) TICLE VI: Other provisions, if any. member can sell their percentage of the REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information.)	becific and cannot be more than five business days prior to or 9 business upon approval by all members.
TCLE V: Effective date, if other than the date in effective date is listed, the date must be splate of filing.) TICLE VI: Other provisions, if any. member can sell their percentage of the REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information.)	business upon approval by all members. business upon approval by all members. ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.)
TCLE V: Effective date, if other than the date in effective date is listed, the date must be splate of filing.) TICLE VI: Other provisions, if any. member can sell their percentage of the REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under lam aware that any false infor constitutes a third degree felorical services.)	business upon approval by all members. business upon approval by all members. ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. emation submitted in a document to the Department of State
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TCLE V: Effective date, if other than the date in effective date is listed, the date must be splate of filing.) TICLE VI: Other provisions, if any. member can sell their percentage of the REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under lam aware that any false inforconstitutes a third degree feloring Nancy Olivotti \$125.00 Filing Fee for Articles of Or	business upon approval by all members. business upon approval by all members. ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. I mation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) Typed or printed name of signee
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ARTICLE IV-

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