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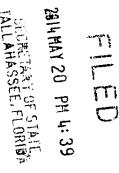
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K. SALY EXAMINER

MAY 3 0 2014

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Aegis Operations LLC  Name of Lir	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:
Christopher Stanley Brantley	Name of Person
Aegis Operations LLC	Firm/Company
3725 Pine Street	
	Address
Jacksonville, FL 32205	Tity/State and Zip Code
Csb724@gmail.com E-mail address: (to be used	d for future annual report notification)
For further information concerning this matter, plea	ase call:
Christopher S Brantley at ( §	904 ) 891-5250
Enclosed is a check for the following amount:	,
	S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	EFFECTIVE DATE
	204
Aegis Operations LLC (Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3725 Pine St Jacksonville, FL 32205	3725 Pine St Jacksonville, FL 32205
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered	
Christopher Stanley Brantley Name	
3725 Pine Street	20 5
Florida street address (P.O. Bo	x NOT acceptable)
Jacksonville	FL 32205
City	Zip 3
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ol	ervice of process for the above stated limited liability company at pot the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance obligations of my position as registered agent as provided for in oper 605, F.S
(CONTINU	JED)

Page 1 of 2

<u>'itle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
MGR - Manager	Christopher Stanley Brantley
· · · · · · · · · · · · · · · · · · ·	3725 Pine Street
	Jacksonville, FL 32205
· · · · · · · · · · · · · · · · · · ·	
V: Effective date, if other than the date of tive date is listed, the date must be speci	filing: 05/13/2014 (OPTIONAL) fic and cannot be more than five business days prior to or 9
V: Effective date, if other than the date of tive date is listed, the date must be specifiling.) VI: Other provisions, if any.	
V: Effective date, if other than the date of tive date is listed, the date must be specifiling.) VI: Other provisions, if any.	fic and cannot be more than five business days prior to or 9
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V: Effective date, if other than the date of tive date is listed, the date must be specifiling.)  VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a member of	fic and cannot be more than five business days prior to or 9
V: Effective date, if other than the date of tive date is listed, the date must be specifiling.)  VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a member of	per or an authorized representative of a member. 2023 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. tion submitted in a document to the Department of State is provided for in s.817.155, F.S.)