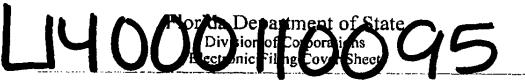
Division of Corporations

Page I of I



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.	

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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

Email	Address:	•	

FLORIDA LIMITED LIABILITY CO. Eagles Den, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registratiu Division of	n Section Corporations		
SUBJECT: <u>Eagle</u> s	Den LLC Name of Lir	nited Liability Company	
	s of Organization and fee(s) a	J	
Cindy N		Name of Person	
<u>304 Ma</u>	plewood, LLC		
		Firm/Company	
304 Ma	plewood Avenue	Address	
Portsmo	outh. NH 03801	City/State and Zip Code	
cindynlx58@g	mail.com	ed for future annual report notifie	
	ti-mail address: (to be use	ed for hiture annual report notifie	ation)
For further informati	on concerning this matter, ple	ase call:	
Cindy Nix		603) 294-0421	
Na	me of Person	Area Code Daytime Te	elephone Number
Enclosed is a check f	or the following amount:		
☐ \$125.00 Filing Fee	☑S130.00 Filing Fee & Certificate of Status	St 55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S: 160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is eaclosed)
	ulling Address	Street/Courier Ade	• • • • • • • • • • • • • • • • • • • •

Multing 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

AIKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Eagles Den. LLC		
(Must e	nd with the words "Lim	ited Liability Compuny, "L.L.C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and stree	t address of the princip	al office of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
304 Maplewood Avenue		304 Maplewood Avenus
Portsmouth, NH 03801		Portsmouth, NH 03801
The Limited Liability Comp	any cannot serve as its o	ice, & Registered Agent's Signature: own Registered Agent. You must designate an individua
The Limited Liability Comp nother business entity with	any cannot serve as its can active Florida registr	ice, & Registered Agent's Signature: ovn Registered Agent. You must designate an individua ation.)
The Limited Liability Computer business entity with the name and the Florida street.	any cannot serve as its can active Florida registr	ice, & Registered Agent's Signature: ovn Registered Agent. You must designate an individua ation.)
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The Limited Liability Compunother business entity with The name and the Florida street CTC	any cannot serve as its of an active Florida registreet address of the registreet address of the registreet N N South Pine Island R	ice, & Registered Agent's Signature: own Registered Agent. You must designate an individua ation.) ered agent are: nme oad #250

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 605, F.S..

Registered Agent's Signature (REQUIRED) For Transport Formation

(CONTINUED)

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DIVISION OF CORPORATIONS

16. IIII | I | AM 8: 3.7

Title: "AMBR" = Authorized N "MGR" = Manager		
MGR	Eric Grondeht 304 Maplewood Avenue	
	Porsmouth, NH 03801	
(Use attachment (fineces		
LE V: Effective date, if of fective date is listed, the	her than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business days prior to or 90) day
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DIVISION OF CORPORATIONS