

L14000163842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

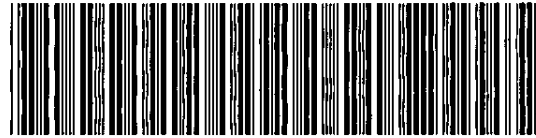
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/4  
10/26/14



October 20, 2014

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

Re: Order #: 9316492 SO  
Customer Reference 1: 14351/072844  
Customer Reference 2:

Dear Department of State, Florida :

Please obtain the following:

EVERGREEN CAPITAL, LLC (FL)  
Formation  
Florida

EVERGREEN CAPITAL, LLC (FL)  
Cert Copy of Articles of Org  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan  
Senior Fulfillment Specialist  
Connie.Bryan@wolterskluwer.com

ARTICLES OF ORGANIZATION  
OF  
EVERGREEN CAPITAL, LLC

**ARTICLE I: - Name**

The name of the Limited Liability Company is EVERGREEN CAPITAL, LLC

**ARTICLE II: - Address**

The mailing address and street address of the principal office of the Limited Liability Company is:

1153 Bergen Parkway  
1-221  
Evergreen, Colorado 80439

**ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature**

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

NRAI Services, Inc.  
1200 South Pine Island Road  
Plantation, Florida 33324

*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.*

NRAI SERVICES, INC., as Registered Agent

Michele Holden  
Name: Michele Holden  
Title: Asst. Secretary

**ARTICLE IV: - Management**

The name and address of each person authorized to manage and control the limited liability company is as follows:

<u>Title:</u>	<u>Name and Address:</u>
AMBR	Laura Wallace 1153 Bergen Parkway 1-221 Evergreen, Colorado 80439

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on  
October 18, 2014.

  
\_\_\_\_\_  
Laura Wallace, Member

(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 Section 817.155, Florida Statutes.)

\_\_\_\_\_  
Laura Wallace  
Typed or printed name of signee

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TALLAHASSEE, FLORIDA