

L15000/22479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

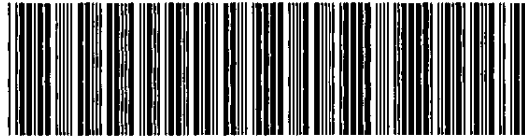
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

WIS-44393

Office Use Only



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06/23/15--01006--013 **160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUL 14 AM 7:31

APPROVED
AND
FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Layne Logistics LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jessica Chambers
Name of Person

Layne Logistics LLC
Firm/Company

1801 Drake Ave. Unit A
Address

Panama City, Florida 32405
City/State and Zip Code

donald_eutene@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Chambers (850) 630-6987
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$160.00 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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 29, 2015

JESSICA CHAMBERS
1801 DRAKE AVE. UNIT A
PANAMA CITY, FL 32405

SUBJECT: LAYNE LOGISTICS LLC
Ref. Number: W15000044393

We have received your document for LAYNE LOGISTICS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 015A00013617

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVED
AND
FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

15 JUL 14 AM 7:31

Layne Logistics LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1801 Drake Ave. Unit A
Panama City Fla.
32405

Same

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jessica Chambers
Name

1801 Drake Ave Unit A
Florida street address (P.O. Box **NOT** acceptable)

Panama City Fla. 32405
City State Zip

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..

Jessica Chambers

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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AND
FILED

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company

15 JUL 11 AM 7:31

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jessica Chambers
1801 Drake Ave Unit A
Panama City, Fla. 32405

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing July 8, 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Jessica Chambers

Signature of a member or an authorized representative of a 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 s.817.155, F.S.)

Jessica Chambers

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)