

L160000070640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

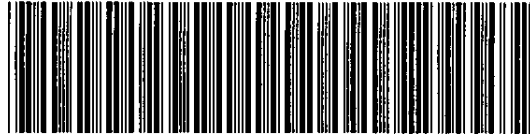
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

~~Witb-5442~~

Office Use Only



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01/08/16--01020--029 \*\*125.00

2016 APR -5 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 12 2016

T. BROWN

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SKYTRAILS, 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:

LARRY WALLACE

Name of Person

SKYTRAILS, LLC

Firm/Company

803 RAMBLING DRIVE CIRCLE

Address

WELLINGTON, FL 33414

City/State and Zip Code

LWALLACE52@ME.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LARRY WALLACE

904

540-7221

at ( )

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**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

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

January 5, 2016

To Whom it May Concern,

Please find enclosed, my completed application and check for \$125 for the formation of a new Florida LLC. I am the sole member as well as the registered agent for this LLC.

My address is:

803 Rambling Drive Circle  
Wellington, FL 33414

My phone numbers are:

Cell 904-540-7221  
Home 561-790-3325

Respectfully,

A handwritten signature in black ink, appearing to read 'Larry Wallace', with a large, stylized initial 'L'.

Larry Wallace



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 26, 2016

LARRY WALLACE  
803 RAMBLING DRIVE CIR  
WELLINGTON, FL 33414

SUBJECT: SKYTRAILS, LLC  
Ref. Number: W16000005442

We have received your document for SKYTRAILS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is M14000005708 - SKYTRAILS, LLC.

Please return 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.

Teresa Brown  
Regulatory Specialist II

Letter Number: 516A00001708

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~SKYTRAILS, LLC~~

SKYTRAILS GLOBAL, LLC

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

2016 APR -5 PM 4:06  
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:

803 RAMBLING DRIVE CIRCLE  
WELLINGTON, FL 33414

Mailing Address:

803 RAMBLING DRIVE CIRCLE  
WELLINGTON, FL 33414

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:

MGR

LARRY WALLACE

Name

803 RAMBLING DRIVE CIRCLE

Florida street address (P.O. Box **NOT** acceptable)

WELLINGTON

FL

33414

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..

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR

LARRY WALLACE

803 RAMBLING DRIVE CIRCLE

WELLINGTON, FL 33414

(Use attachment if necessary)

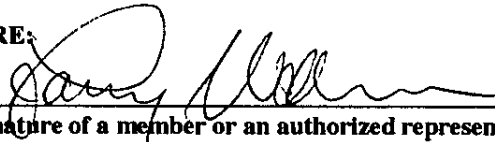
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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:**



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

LARRY WALLACE

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)