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SECRETARY OF STATE

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COVER LETTER

TO: **Registration Section Division of Corporations** SUBJECT: Natural 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: <u>Thomas C. Stoutamire Jr.</u> City/State and Zip Code Lstoutamire@man.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Thomas Stautomire at (850) 566-6693 Area Code Daytime Telephone Number

Mailing Address

Enclosed is a check for the following amount:

\$125.00 Filing Fee

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

\$130.00 Filing Fee &

Certificate of Status

Street Address

\$155.00 Filing Fee &

Certified Copy (additional copy is enclosed)

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

\$160.00 Filing Fee, Certificate of Status &

(additional copy is enclosed)

Certified Copy

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Natural Point of Aim LLC.

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "L.L	.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liabil	lity Company is:
Principal Office Address:	Mailing Address:
3978 Aenon Church Rd 3978 Tallahassee, Florida Tallahassee, Florida Tallahassee	Aenon Church Rd Mussee, Florida 32310
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature (The Limited Liability Company cannot serve as its own Registered Agent. You manother business entity with an active Florida registration.)	-
The name and the Florida street address of the registered agent are:	SEC 16 1
Thomas C. Startamire	<u>Tr</u>
3978 Aenon Church Rd Florida street address (P.O. Box NOT accepta	PH 500
— ,, \ — , \	==

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..

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

AMBE INCMAS C. TOUTAMINE IT STR ACRON Church Rd Tolkhossec, Florida 32310 Lisa B. Startownine 397B. Acron Church Rd Tolkhossec, Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec, Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec, Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec, Florida 32310 Towes J. Blackwell 397B. Acron Church Rd Tolkhossec, Florida 32310 The date is listed, the date must be specific and cannot be more than five business days prior to or 90 do of filing. The date is listed, the date must be specific and cannot be more than five business days prior to or 90 do of filing. The date is listed, the date must be specific and cannot be more than five business days prior to or 90 do of filing. The date is listed, the date must be specific and cannot be more than five business days prior to or 90 do of filing. The date is listed, the date must be specific and cannot be more than five business days prior to or 90 do of filing. Towes C. Stoutawite J. Towes C. Stoutawite J. Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
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ARTICLE IV-