

L16 000 224608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

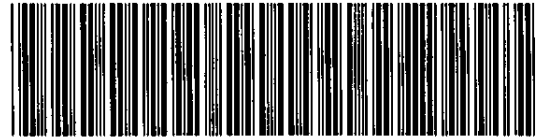
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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December 9, 2016

Florida Secretary of State
New Filing Section Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Record LLC (Surf and Turf Outfitters, LLC)

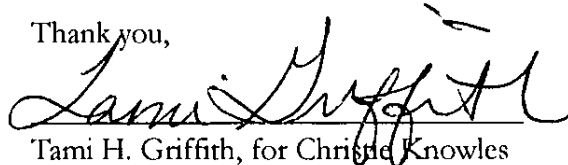
Dear Sir or Madam:

I have enclosed a Certificate of Formation and a check for \$130.00.

Please record and return a stamped copy for my file in the enclosed return overnight shipment. Time is of the essence in this matter, we have a real estate matter that will close next week and we need the attached formation papers. Please call me if there are any problems or questions regarding this LLC.

Thank you for your prompt attention.

Thank you,



Tami H. Griffith, for Christie Knowles
tami@kkslawgroup.com

/thg
Enclosure

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SURF AND TURF OUTFITTERS, 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:

CHRISTIE D. KNOWLES

Name of Person

KNOWLES & SULLIVAN, LLC

Firm/Company

400 BROAD STREET, SUITE 105

Address

GADSDEN, ALABAMA 35901

City/State and Zip Code

CHRISTIE@KKSLAWGROUP.COM

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

For further information concerning this matter, please call:

CHRISTIE KNOWLES 256 547-7200
Name of Person at () 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SURF AND TURF OUTFITTERS, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

1118 PARK LANE
GULF BREEZE, FLORIDA 32563

Mailing Address:

1118 PARK LANE
GULF BREEZE, FLORIDA 32563

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:

MAEGAN MINTON

Name

1118 PARK LANE

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

GULF BREEZE, FLORIDA 32563

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.

Megan Minton

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

BRADFORD MINTON

1118 PARK LANE

GULF BREEZE, FLORIDA 325863

AMBR

MAEGAN MINTON

1118 PARK LANE

GULF BREEZE, FLORIDA 325863

(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.

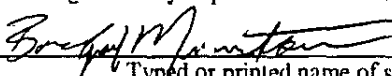
NONE

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.

 **Bradford minton**

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)