117000154174

(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
"CO.," PER PRINCIN REQUEST.
"CO.," PER PATRON REQUEST.

Office Use Only



000301297870

07/19/17--01005--001 **160.60

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Pan handle Tee Co. LLC Name of Limited Liability Compuny
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
J. F. Weatherly, Jt. Name of Person
Panhandle Ice Co., LLC Firm/Company
P.O. Box 15486 Address
City/State and Zip Code Fweetherly 69 may 1. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tim Weatherly at (850) 545-265) Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee & S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) S125.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

Panhandle I ce LLC

(Must contain the words "Limited Liability Company! "L.L.C.." or "L.L.C.")

ARTICLE II - Address:

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

Principal Office Address:

1528 Bolmon + Trace Policy 15486

Tollahasser, FL 32301 Tallahasser, FL 32317

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:

Name

1528 Belmont Trace
Florida street address (P.O. Box NOT acceptable)

Tallahassee = L 3 2301

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 (KEOUIREIL)

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	James F. Westherly, Jr. 10/19/15/486 Tallaha SSEE, PL 32317
	
(Use attachment if necessary)	
LEV: Effective date, if other than the date of filing fective date is listed, the date must be specific an of filing.) If the date inserted in this block does not meet the	:
LE V: Effective date, if other than the date of filing ffective date is listed, the date must be specific an of filing.) If the date inserted in this block does not meet the ument's effective date on the Department of State. LE VI: Other provisions, if any.	d cannot be more than five business days prior to or 90 day applicable statutory filing requirements, this date will not be
LE V: Effective date, if other than the date of filing feetive date is listed, the date must be specific an of filing.) If the date inserted in this block does not meet the ument's effective date on the Department of State. LE VI: Other provisions, if any.	d cannot be more than five business days prior to or 90 day applicable statutory filing requirements, this date will not be s records.

Filing Fees:

Tames F. Weatherly, Ir.
Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)