## L17000162406

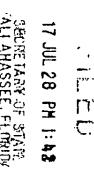
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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JUL 31 2017

K. Brumbley

## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Elite Outdoor Ser  Name of Limited Liability Co	VICES NF LLC
The enclosed Articles of Organization and fee(s) are submitted for f	iling.
Please return all correspondence concerning this matter to the follow	wing:
Jerry Jerome to Name of Person	
Elite Outdoor	Services, LLC.
322 S. MacArthur	-Ave
Address	
Panama City, FL. 3	12401
Jerry 6/307@91	mail con
E-mail address: (to be used for future abdua	al report notification)
For further information concerning this matter, please call:	
Name of Person Area Code D	866-3114 Paytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Fil Certificate of Status Certified Ce	
Mailing Address Stre	et Address
	Filing Section
	ision of Corporations ion Building
	1 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:	
Elite Outdoor Services NF 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: Mailing Address:	
322 S. Macherthur Ave 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 registered agent are:    Serry Jerome Burnes   Parama Series	<u>ר</u>
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)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Jerry Barnes 322 S. Mac Arthur Ave Panana City, Ft. 32401	
(Use attachment if necessary)		
	of filing: (OPTIONAL)	
n effective date is listed, the date must be spate of filing.)  If the date inserted in this block does not rocument's effective date on the Department	secific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as	
n effective date is listed, the date must be spate of filing.)  If the date inserted in this block does not rocument's effective date on the Department	secific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as	
n effective date is listed, the date must be spate of filing.)  2: If the date inserted in this block does not recomment's effective date on the Department ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE  Signature of a magnetic department is executed any aware that any false.	secific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as	

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)