

# L18000104858

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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

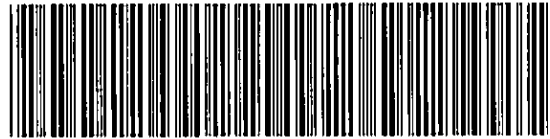
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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CLERK OF COURT  
18 MAY -1 AM 11:00

FILED  
18 MAY -1 AM 11:29  
CLERK OF COURT

MAY 01 2018  
T SCHROEDER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 360 TURNS, 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:

ANN BLACK  
Name of Person  
SMITH, THOMPSON, SHAW, MINACCI, COLON & POWER, P.A.  
Firm/Company  
3520 THOMASVILLE ROAD, FOURTH FLOOR  
Address  
TALLAHASSEE, FL 32309  
City/State and Zip Code  
maria.mccreless@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANN BLACK      850      893-4105  
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

# ARTICLES OF ORGANIZATION OF 360 TURNS, LLC

FILED  
18 MAY -1 AM 11:29  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

\*\*\*\*\*

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. **NAME.**

The name of the Limited Liability Company is **360 TURNS, LLC** (hereinafter referred to as the "Company").

2. **PERIOD OF DURATION.**

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

3. **PURPOSE.**

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. **MAILING ADDRESS OF BUSINESS.**

The mailing address of the business in Florida for the Company is **89 Edgewood Drive, Crawfordville, Florida 32327**. Such address may be changed from time to time as provided in the Operating Agreement.

5. **ADDRESS OF PLACE OF BUSINESS.**

The street address of the place of business in Florida for the Company is: **89 Edgewood Drive, Crawfordville, Florida 32327**. Such address may be changed from time to time as provided in the Operating Agreement.

6. **REGISTERED AGENT.**

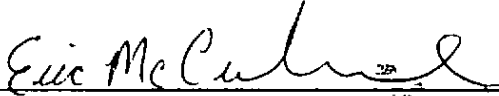
The initial registered agent in Florida for the Company is: **Eric McCreless** the initial, registered office is located at is **89 Edgewood Drive, Crawfordville, Florida 32327.**

7. **MANAGEMENT.**

The name and address of the person authorized to manage and control the Limited Liability Company is as follows:

**Eric McCreless  
89 Edgewood Drive  
Crawfordville, Florida 32327**

**EXECUTED** this 16 day of April, 2018.

  
**ERIC McCRELESS**

8 MAY - 1 AM 11:29  
MAY 1 2018  
MAY 1 2018

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.**

Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is **360 TURNS, LLC.**
2. The name of the registered agent and office is: **Eric McCreless at 89 Edgewood Drive, Crawfordville, Florida 32327.**

<b>ACKNOWLEDGEMENT</b>
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Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.

  
\_\_\_\_\_  
**ERIC McCRELESS, Registered Agent**

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