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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
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March 21, 2019

ALAN L WALTON 4004 W 24TH COURT PANAMA CITY, FL 32405

SUBJECT: ALAN L WALTON LLC Ref. Number: W19000027788

We have received your document for ALAN L WALTON LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 519A00005600

Keyna E Page Regulatory Specialist II

www.sunbiz.org

Division of Comparations DO DOV 6997 Tellahangan Florida 9991

COVER LETTER

TO: 题识数Section Division of Corporations
SUBJECT: Alan C. Walton 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:
Alan C. Worldon "Mbk"
Name of Person
Firm/Company
4004 W. 24th Court MUR
Panama City, Florida, 3,2405
Panama City, Florida, 32405 City/State and Zip Code alanwalton 7@ comcast. net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alan L. Walton MGR" 850 , 960-5114
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee & S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street 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:

(Must (Must Elimited Liability Comp	pany, "L.L.C.," or "LLC")
ARTICLE II - Address: The mailing address and street address of the principal office of the Lin	
Principal Office Address: 4004 W. 24th CT. Panama City Fl. 32405	Mailing Address: 4004 W. 24th CTL MCR Panama City, Fl. 32405
ARTICLE III - Registered Agent, Registered Office, & Registered of (The Limited Liability Company cannot serve as its own Registered Aganother business entity with an active Florida registration.)	Agent's Signature: ent. You must designate an individual or
The name and the Florida street address of the registered agent are:	
Alan Lyan Wa	alton "MGR"

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.

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

Panama City Florida 33405
City State Zip

Registered Agent's Signature (REOURED)

(CONTINUED)

The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager (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 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. 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.

Filing Fees:

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)