L2000039035

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

Office Use Only



600340565276

600340565276 02/11/20--01002--019 **155.00

91 #File U. P. 107

2020 FEB 10 AM 10: 25

_3 1 2 2020 < Brumbley

AUSLEY MCMULLEN

ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET. P.O. BOX 391 (ZIP 32302) TALLAHASSEE, FLORIDA 32301 (850) 224-9115 FAX (850) 222-7560

Writer's Direct Line: (850) 425-5457

February 10, 2020

Secretary of State The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

VIA HAND DELIVERY

Re: Coastal Plains Adventures, LLC

Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for Coastal Plains Adventures, LLC, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company. Also enclosed is our check in the amount of:

\$125.00

Filing Fee

□ \$130.00 Filing Fee &

Certificate of Status

\$155.00 Filing Fee &

Certified Copy (additional copy enclosed) □ \$160.00

Filing Fee,

Certified Copy & Certificate of Status

(additional copy enclosed)

Please do not hesitate to call me at (850) 425-5457 if you have any questions. We will have our messenger return to pick up the certified copy and the certificate of filing.

Thank you in advance for your usual assistance in these matters.

Sincerely,

Donna Marie Walters, FRP Florida Registered Paralegal

/dmw **Enclosures**

ARTICLES OF ORGANIZATION OF COASTAL PLAINS ADVENTURES, LLC

The undersigned, pursuant to the provisions of Chapter 605, Florida Statutes, provides the following information for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE 1. Name

The name of the limited liability company is Coastal Plains Adventures, LLC.

ARTICLE 2. Address

The street and mailing address of the place of business in Florida is:

46 Kinsey Road Crawfordville, Florida 32327

ARTICLE 3. Registered Agent and Registered Office

The name and Florida street address of the initial registered agent in Florida for the limited liability company are:

Ryan Means

46 Kinsey Road Crawfordville, Florida 32327

Having been named as registered agent and as the person to accept service of process for the abovestated limited liability company at the place designated in these Articles, 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, Florida Statutes.

s/Ryan Means
Ryan Means, Registered Agent

ARTICLE 4. Management

The limited liability company shall be managed by at least one Manager and is, therefore, a Manager-managed company. The name and address of each person authorized to manage and control the limited liability company as Manager are as follows:

Ryan Means, Manager

46 Kinsey Road

Crawfordville, Florida 32327

Rebecca Means, Manager

46 Kinsey Road

Crawfordville, Florida 32327

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 10th day of February, 2020.

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 Section 817.155, F.S.

s/Ryan Means

Ryan Means

Authorized Representative of Member