

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : MOORHEAD REAL ESTATE LAW GROUP  
Account Number : I19990000132  
Phone : (850)202-8522  
Fax Number : (850)477-0982

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: justin@altitudeproperty.net

FLORIDA LIMITED LIABILITY CO.  
THE ALTITUDE LIFE, LLC

Certificate of Status	0
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Page Count	03
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**ARTICLES OF ORGANIZATION OF THE ALTITUDE LIFE, LLC**

The undersigned, as the authorized representative of the members of this limited liability company formed under the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes (2020), adopts the following Articles of Organization for such limited liability company:

**ARTICLE I**

Name

The name of the Company is THE ALTITUDE LIFE, LLC (the "Company").

**ARTICLE II**

Principal Office

The street address of the Company's principal office and mailing address is:

321 N. Devilliers Street, Suite 102  
Pensacola Florida 32526

**ARTICLE III**

Initial Registered Agent

The name and street address of the Company's initial registered agent for service of process is:

Stephen R. Moorhead  
127 Palafox Place, Suite 200  
Pensacola, Florida 32502

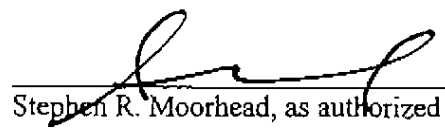
**ARTICLE IV**

Managers

The Company shall be manager managed. The name and address of the initial manager is:

Justin C. Loftin  
321 N. Devilliers Street, Suite 102  
Pensacola Florida 32526

Dated this 30<sup>th</sup> day of September, 2021.

  
Stephen R. Moorhead, as authorized  
representative for the members

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**ACCEPTANCE BY REGISTERED AGENT**

Having been named as registered agent and to accept service of process for The Altitude Life, LLC, a Florida limited liability company, at the place designated as the registered office, 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 duties and obligations of my position as registered agent.

Dated this 30<sup>th</sup> day of September, 2021.

  
\_\_\_\_\_  
Stephen R. Moorhead  
127 Palafox Place, Suite 200  
Pensacola, Florida 32502  
Registered Agent

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