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Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAW OFFICE OF NATHAN L. TOWNSEND, PA

Account Number : I20050000145 Phone : (813)988-5500 Fax Number : (813)988-5510

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

nathan@nltlaw.com Email Address: __

FLORIDA LIMITED LIABILITY CO.

Quiver Holdings, LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION OF QUIVER HOLDINGS, LLC

ARTICLE I - NAME

The name of the limited liability company is Quiver Holdings, LLC, ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 215 Osceola Court Winter Park, Florida 32789 Mailing Address: 215 Osceola Court Winter Park, Florida 32789

ARTICLE III - REGISTERED AGENT. REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Nathan L Townsend PA 1000 Legion Place, Stc. 1200 Orlando, Florida 32801

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.

/Nathan L. Townsend/

Nathan L Townsend PA

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ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

MGR

Don E. Tillery, Jr. 215 Osceola Court

Winter Park, Florida 32789

MGR

Lisa Tillery

215 Osceola Court

Winter Park, Florida 32789

REQUIRED SIGNATURE:

Di 1, 2023 10:00 EST)

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.

Don E. Tillery, Jr.

Typed or printed name of signee

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