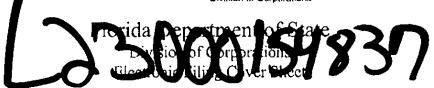
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000126268 3)))



H230001262683ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)517-6381

From:

Account Name : REED MAWHINNEY & LINK, PLLC

Account Number : I20180000105 Phone : (863)687-1771 Fax Number : (863)687-1775

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

Email Address: katie@polklawyer.com

SECRETARY OF STATE AGLAHASSER, FLORIDA

FLORIDA LIMITED LIABILITY CO. Legendary African Adventures, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

Page: 2 of 4

H23000126268 3

18636871775

H23000126268 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Page: 3 of 4

	can Adventures, LLC		<u></u>	
(Must	teontain the words "Limited Liabil	ity Company, "	"L.L.C.," or "LLC.")	
CLE II - Address: ailing address and str	reet address of the principal office of	of the Limited f	Liability Company is:	
Principal Office Address:		Mailing Address:		
2721 12-11-2	N. 1	2721	1 Bellerive Drive	
2721 Bellerive	Drive		Lakeland, FL 33803	
CLE III - Registere Limited Liability Coner business entity wit	d Agent, Registered Office, & Rempany cannot serve as its own Register an active Florida registration.)	Lake	land, FL 33803	
CLE III - Registere Limited Liability Coner business entity wit	d Agent, Registered Office, & Rempany cannot serve as its own Reginh an active Florida registration.)	gistered Agent stered Agent. Y	t's Signature:	
CLE III - Registere Limited Liability Coner business entity wit	d Agent, Registered Office, & Renpany cannot serve as its own Registration.) street address of the registered agenth Reed Mawhinney & Link Nar	gistered Agent Stered Agent. Y	t's Signature:	
CLE III - Registere Limited Liability Coner business entity wit	d Agent, Registered Office, & Renpany cannot serve as its own Register and active Florida registration.) street address of the registered agenth Reed Mawhinney & Link	I ake	t's Signature: You must designate an individual o	
CLE III - Registere Limited Liability Coner business entity wit	d Agent, Registered Office, & Renpany cannot serve as its own Registered and active Floridu registration.) street address of the registered agentation Reed Mawhinney & Link Nar. 53 Lake Morton Drive, Ste	gistered Agent. Y at are: ne to 100 D. Box NOT ac	t's Signature: You must designate an individual o	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page: 4 of 4

\$ 30.00 Certified Copy (Optional) 5 5.00 Certificate of Status (Optional) From: Andrew M. Reed

H23000126268 3

T <u>ttle:</u> "AMBR" = A	athorized Member	Name and Address:
"MGR" = Ma	inger	
MGR		O. Byron Hodge
		2721 Bellorive Drive Lakeland, PL 33803
		Lakuishii, FL 3360.3
-		
•		
CERVERMON	ent if necessary)	date of filing: . (OPTIONAL)
CLE V: Effective effective date is to of filling.) If the date inser	e date, if other than the clated, the date must be	date of filing:
CLE V: Effective effective date is the of filling.) If the date inser	e date, if other than the elleted, the date must be ted in this block does not be to date on the Departm	a specific and cannot be more than five business days prior to or 90 days : not meet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective effective date is to of filling.) If the date insert the cument's effective CLE VI: Other p	e date, if other than the elleted, the date must be ted in this block does not be to date on the Departm	a specific and cannot be more than five business days prior to or 90 days : not meet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective effective date is to of filling.) If the date inserticument's effection of the comment of the	c date, if other than the colleted, the date must be ted in this block does not on the Department of the Signature of the This document is explained and the same of the same	a specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be listent of State's records.
CLE V: Effective effective date is to of filling.) If the date inserticument's effection of the comment of the	c date, if other than the colleted, the date must be ted in this block does not on the Department of the Signature of the This document is explained and the same of the same	Byron Hodge a member or an authorized representative of a member, secured in occordance with section 605,0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State; gree felony as provided for in s.817,155, F.S.