

L97000001094

TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: AMERICAN ADVENTURES, L.C.
(Proposed limited liability company name - must include suffix)

900002308349--7
-10/01/97--01034--001
****285.00 ****285.00

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit
\$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50.

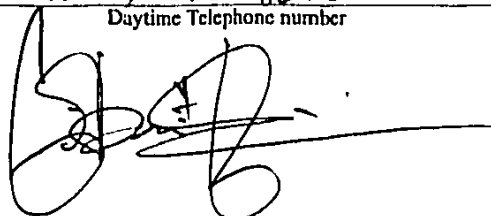
Please send one check for the total amount made payable to the Florida Department of State.

FROM: Estime, Inc
Gilbert Estime - President
Name (Printed or typed)

444 Brickell Ave Suite 51-221
Address

Miami, FL 33131
City, State & Zip

(305) 235-8240
Daytime Telephone number



Name	10/2/97
Availability	OK
Document Examiner	DCC
Notary	---
Witness	---
Secretary	---
W. P. Verifier	DCC

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMERICAN ADVENTURES, L.C.

ARTICLE II - Address:

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

9526 Oak Bay Road #112
Port Ludlow, Wa 98365

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual existence

ARTICLE IV - Management:

(check and complete the appropriate statement)

- ☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

- ☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Bob Swift AND GARRON PETRICK
9526 Oak Bay Road #112
Port Ludlow, Washington 98365

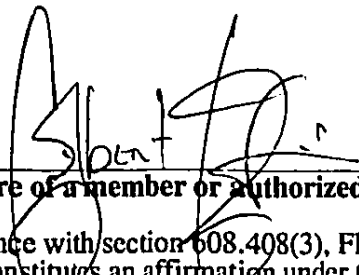
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TALLAHASSEE

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of AMERICAN ADVENTURES, L.C. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is
- 3) if any, the agreed value of property other than cash contributed by member(s) is
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is
This total includes amounts from 2 and 3 above.

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\$40,000
\$0
\$40,000


Signature of a member or authorized representative of a member.

PRESIDENT of Estime, Inc.

In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**AFFIDAVIT OF MEMBERSHIP, CONTRIBUTIONS AND
AUTHORIZED REPRESENTATIVE**

The undersigned member of American Adventures, LC, deposes and says.

1). the above limited liability Company has at least 2 members.

ROBERT SWIFT / CARRAN
PETRICK

2). the total amount of cash contributed by the member(s) is:

\$ 40,000.

3). if any, the agreed value of property other than cash contributed by member(s) is. (description of property must be attached)

\$ _____

4). the amount of cash and property anticipated to be contributed by member(s) is: (total must equal line 2 and 3)

\$ 40,000.

5). Esteem, Inc may will designated as the authorized rep for this limited liability company, until further notice.

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Signature of a member of American Adventures, LC

The execution of this affidavit constitutes an affirmation that all information given is correct and true.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS
THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

AMERICAN ADVENTURES, L.C.

2. The name and address of the registered agent and office is:

Colbert Estime

(NAME)

444 Brickell Ave, Suite 51-221

(P. O. Box NOT ACCEPTABLE)

Miami, FL 33131

(CITY/STATE/ZIP)

*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.*

Colbert Estime
(SIGNATURE)

9/27/97
(DATE)

Filing Fee: \$ 35 for Designation of Registered Agent

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