

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L25000107741
FILED 8:00 AM
March 13, 2025
Sec. Of State
snchatham

Article I

The name of the Limited Liability Company is:
SOUTHERN MOOSE RESTORATIONS LLC

Article II

The street address of the principal office of the Limited Liability Company is:
18905 NORTHEAST 21 STREET
GAINESVILLE, FL. US 32609

The mailing address of the Limited Liability Company is:
18905 NORTHEAST 21 STREET
GAINESVILLE, FL. US 32609

Article III

The name and Florida street address of the registered agent is:
THOMAS E SCOGGINS
18905 NORTHEAST 21 STREET
GAINESVILLE, FL. 32609

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.

Registered Agent Signature: THOMAS E SCOGGINS

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
THOMAS E SCOGGINS
18905 NORTHEAST 21 STREET
GAINESVILLE, FL. 32609 US

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Signature of member or an authorized representative

Electronic Signature: THOMAS E SCOGGINS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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Name Release Affidavit

I, Thomas E. Scoggins, Manager of Southern Moose Restorations, LLC. Document Number: L22000227624, have no intention of revoking the dissolution of this entity, therefore, I release the name for use by another entity.

Signed this 10th day of March, 2025.

Southern Moose Restorations, LLC

By: [Signature]
Thomas E. Scoggins, Manager

STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 10th day of March, 2025, by Thomas E. Scoggins, as Manager of Southern Moose Restorations, LLC.

[Signature]

Personally Known X OR Produced Identification _____

Type of Identification Produced _____



TERESA WILLARD
Notary Public
State of Florida
Comm# HH217860
Expires 1/19/2026