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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Keepin It Reel Fishing LLC (Name of Limited Liability Company)
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Vincent Brown (Name of Person)
(Name of Person)
Kegpin It REEL Fishma LCC
(Firm/Company)
2231 SW 106 AVE
(Address)
MIRAMAN FL 33025 PS 3
(City/state and Zip Code)
MIRAMAN FL 3302) (City/State and Zip Code) For further information concerning this matter, please call: (914)
1000 HAMIS at (919) 60 8-1311, 831 ===================================
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)}
Mailing Address Street/Courier Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:
Principal Office Address: Mailing Address:
Vicent Brown 2331 Sw 106 Ave Miramor, FL 33025 Es
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
TODD HARRIS
Name
5550 N.W 175 St.
Florida street address (P.O. Box NOT acceptable)
MiAmi FL 3305
City, State, and 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

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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2 8450533

Title:	Name and Address:
	ch Manager or Managing Member is as follows:
ARTICLE IV- Manager(s) or Managing Member(s):

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	12315 WILL BRUNN 22315 WILL AVEL MICHARAR FIREST
MGRM	TODD HARRIS 5850 N. W 125 ST. MIAMI FIA 33055
	OF PR
	OF STATE OF
(Use attachment if necessary)	

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.402(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certified of Status (Optional)

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