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SECRETARY OF STATE

J. BRYAN

MAR 3 0 2009

EXAMINER

COVER LETTER

TO:	Registration : Division of Co			
SUBJ	ECT: Ballistic	Coconut		
		Name of Limit	ed Liability Company	
The er	nclosed Articles of	of Organization and fee(s) are	submitted for filing.	45 1
Please	return all corresp	pondence concerning this mat	ter to the following:	10 HAR 29 H
	Patrick Carr	illo		\$ 50 P
			Name of Person	OF STA
			Firm/Company	<u>SM</u> :
	3241 Whisp	er Lake Lane Apt F		·F**
		· · · · · · · · · · · · · · · · · · ·	Address	
	Winter Park	, Florida, 32792		
		Cit	y/State and Zip Code	
	patrick.carril	lo@yahoo.com	for future annual report notification)	
For fu	rther information	concerning this matter, please	•	
Patri	ck Carrillo		at (915) 472-0940	gerliell oak veller de gewonne krefanke voor heer was de moor voor voor voor de moor voor voor voor de moor voor voor voor voor voor voor voor
	Name	of Person	Area Code & Daytime Telep	hone Number
Enclo	sed is a check fo	or the following amount:		
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rele

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Α	RTI	CI	æ	I	_ `	Na	me

The name of the Limited Liability Company is:

Ballistic Coconut L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
3241 Whisper Lake Lane	3241 Whisper Lake Lane
Apartment F	Apartment F
Winter Park, Florida, 32792	Winter Park, Florida, 32792

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:

Patrick Carr	illo
	Name
3241 Whisp	per Lake Lane, Apt F
	Florida street address (P.O. Box NOT acceptable)
Winter Park	FL 32792
	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 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..

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Patrick Carrillo
	3241 Whisper Lake Lane Apt F
	Winter Park, FI, 32792
MGRM	John Randall Watson
	1049 Chatham Pines Circle Apt. 215
	Winter Springs, Fl, 32708
MGRM	Seythe McCoy
	3921 Stonehaven Road
	Orlando, FL, 32817
(Use attachment if necessary)	
•	e date of filing: (OPTIONA
LE V: Effective date, if other than the fective date is listed, the date must be	e date of filing: (OPTIONA be specific and cannot be more than five business day
LE V: Effective date, if other than the fective date is listed, the date must be	
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LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a memb	per or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a memb (In accordance with se	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution attitutes an affirmation under the penalties of perjury

ARTICLE IV- Manager(s) or Managing Member(s):

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)