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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

B. KOHR

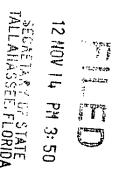
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(850) 245-6051.

COVER LETTER

TO:

Registration Section Division of Corporations

SUR IFCT.

TAG TIME, LLC

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:

JOSEPH P. TAGLIOLA

Name of Person

TAG TIME, LLC

Firm/Company

40 HENDRICKS ISLE #501

Address

FORT LAUDERDALE, FL 33301

City/State and Zip Code

JOE_TAG@LIVE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH P. TAGLIOLA

..305

934-4199

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TAG TIME, LLC		
(Must en	d with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Addre	ss:	
The mailing address an	d street address of the	e principal office of the Limited Liability Company is
Principal Office Addr	ess:	Mailing Address:
40 HENDRICKS ISLE #501		40 HENDRICKS ISLE #501
FORT LAUDERDALE, FL 33	301	FORT LAUDERDALE, FL 33301
The Limited Liability Compar business entity with an active	tered Agent, Registe by cannot serve as its own Re Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The Limited Liability Compar business entity with an active The name and the Flori	tered Agent, Registe ny cannot serve as its own Re Florida registration.) da street address of th	red Office, & Registered Agent's Signature:
The Limited Liability Compar business entity with an active The name and the Flori	tered Agent, Registe ny cannot serve as its own Re Florida registration.) da street address of the SEPH P. TAGLIOLA	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
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The Limited Liability Comparbusiness entity with an active The name and the Flori JOS 40 F	tered Agent, Registe ny cannot serve as its own Re Florida registration.) da street address of the EPH P. TAGLIOLA Na HENDRICKS ISLE #501 Florida street RT LAUDERDALE,	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are: ame address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	JOSEPH P. TAGLIOŁA
	40 HENDRICKS ISLE #501
	FORT LAUDERDALE, FL 33301
MGR	AMY R. TAGLIOLA
	40 HENDRICKS ISLE #501
	FORT LAUDERDALE, FL 33301
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	And hand the second place are second and the second
(Use attachment if necessary)	
(Ose actaonment if necessary)	
CLE V: Effective date, if other th	nan the date of filing: (OPTIONAL
	e must be specific and cannot be more than five business
effective date is listed, the date of fili	
o or 90 days after the date of fili	-
o or 90 days after the date of fili <u>REQUIRED</u> SIGNATURE:	-
o or 90 days after the date of filing response to the date of filing response to the days after the date of filing response to the days after the date of filing response to the days after the date of filing response to the days after the date of filing response to the date of fi	ing.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee