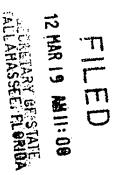
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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03/19/12--01048--006 **130.00



D. BRUCE
MAR 2 0 2012
EXAMINER

EFFECTIVE DATE 3/16/12

۲,	TO:	Registration S Division of Co		,	100
्री सुद्धार	SUBJI	ECT:	2 Breed C	ted Liability Company	,
			f Organization and fee(s) are		
	Please	return all corresp	ondence concerning this ma	tter to the following:	
		<u> </u>	inson J	Brown Name of Person	
		1/2 1	Breed C	ycles Firm/Company	12 MAS
,		ا مِا10	30 Overse	Pas Hwy Address	TARY OF ASSETS F
	-	hey Half	-breed cycle	ity/State and Zip Code Sala Terranova for future annual report notification)	a.net
	For fur	ther information	concerning this matter, pleas	• , , ,	
	_E	Brook Name	V lopp of Person	at (305) 360 - Area Code & Daytime Telephone	7699 Number
		<u>D</u>	\$130.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	60.00 Filing Fee, ortificate of Status & ortified Copy ditional 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

ARTICLE I - Name:
The name of the Limited Liability Company is:
1/2 Breed Cycles LLC. (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:
106130 overseas Hwy Ney Largo, FL 33037 Ney Largo, FL 33037
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:
Vinson T Brown Name 945 Plantation RD Florida street address (P.O. Box NOT acceptable)
1601 1000 0 77077

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2



Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGR	Vinson J Brown
•	
(Use attachment if necessary)	
CLE V: Effective date, if other than the ffective date is listed, the date must be	date of filing: 3-16-12 (OPTION e specific and cannot be more than five business d
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CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	e specific and cannot be more than five business d
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a membe (In accordance with section 608 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	e specific and cannot be more than five business described and cannot be more than five business described an authorized representative of a member. 1.408(3), Florida Statutes, the execution of this document in the penalties of perjury that the facts stated hereingare true mation submitted in a document to the Department State is as provided for in s.817.155, F.S.)
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a membe (In accordance with section 608 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	specific and cannot be more than five business despective and authorized representative of a member. 3.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated hereignare true mation submitted in a document to the Department of State

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows: