Requester's Name  4747 B 3 m St.  Address  City/State/Zip  Phone #	33428	
		fice Use Only
CORPORATION NAME(S) & DOCUM		·
1. 00855 - 00827 - 00 (Corporation Name)	676 - 03963 (Document #)	3
2. (Corporation Name)	(Document #)	4000045488844 -08/22/0101055014 
3(Corporation Name)	(Document #)	
4(Corporation Name)	(Document #)	400004548884
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Photocopy	Certified Copy Certificate of Status
NEW FILINGS  Profit Not for Profit	AMENDMENTS  Amendment Resignation of R.A.	. Officer/Director
Limited Liability Domestication Other	Change of Registere Dissolution/Withdra Merger	d Agent SECRED AUG
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUA  Foreign Limited Partnership Reinstatement Trademark Other	PH 2
		Examiner's Initials

CR2E031(7/97)



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 24, 2001

A CHATT AWAY L.L.C. 4747 BISON ST. BOCA RATON, FL 33428

SUBJECT: A CHATT AWAY L.L.C. Ref. Number: W01000019770

We have received your document for A CHATT AWAY L.L.C. and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 801A00048516

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY A Chatt Away L **ARTICLE I - Name:** The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: 4747 Bison St ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: lorida street address (P.O. Box NOT acceptable) TOO FL 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.. Registered Agent's Signatur Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. must be added if an effective date is requested) (An additional atticle Signature of a member or an authorized representative of a member. (In accordance with section 608.408(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:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5.00 Certificate of Status (Optional)