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PICK-UP WAIT MAIL
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Be Ready Trainers, 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:			
Tanya Tooker			
(Name of Person)			
Be Ready Trainers, LLC			
(Firm/Company)			
3580 N.E. 31st Avenue			
(Address)			
Lighthouse Point, FL 33064			
(City/State and Zip Code)			
For further information concerning this matter, please call:			,
Tanya Tookerat (954)803-0523	, , , , , , , , , , , , , , , , , , ,		ţ
(Name of Person) (Area Code & Daytime Telephone Number)		**	
STREET ADDRESS: MAILING ADDRESS:			

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company i Be Ready Trainers, LLC	s:	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	
3580 N.E. 31st Avenue Lighthouse Point, FL 33064	3580 N.E. 31st Avenue Lighthouse Point, FL 3306	4
ARTICLE III - Registered Agent, Registere	ed Office, & Registered Agent's Si	gnature:
. The name and the Florida street address of the	e registered agent are:	
	Гапуа Tooker Name	-
	3580 N.E. 31st Avenue Idress (P.O. Box NOT acceptable)	EFFECTIVE DATE
	Lighthouse Point, FL 33064 City, State, and Zip	
Having been named as registered agent and to liability company at the place designated in the registered agent and agree to act in this capacitatutes relating to the proper and complete paccept the obligations of my position as registered.	his certificate, I hereby accept the ap city. I further agree to comply with t erformance of my duties, and I am fo	pointment as he provisions of all amiliar with and
Register	ed Agent's Signature	

(CONTINUED)

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

Title:		Name and Address:		
$\overline{MGR} = Ma$		· — · - · ·		
"MGRM" = N	Managing Member			
MGRI	M	Tanya Tooker		
7		3580 N.E. 31st Avenue		~4=
	, # .AAS1V	Lighthouse Point, FL 33064		
•				
			•	
			•	
	- Form of Managem			
		be managed by one manager or more managers and	is, therefor	re a
manager – ma	maged company.			
ADTICLEV	T – Requested Effecti	ve Nate:		
	e requested to be 10/13			
REQUIRED	SIGNATURE:			
		Tage Tooken		
	Signature of a mem	ber of an authorized representative of a member.	-	
	Signature or a mem	ber of an authorized representative of a member.		
	(In accordance with s	section 608.408(3), Florida Statutes, the execution		
		stitutes an affirmation under the penalties of perjury		
	that the facts stated h	erein are true.)		
	Tanya	Tooker		
		Typed or printed name of signee	-	
		Filing Fees:		. ,
		\$100.00 Filing Fee for Articles of Organization		
		\$ 25.00 Designation of Registered Agent	1	7
		\$ 30.00 Certified Copy (Optional)	· · · · · · · · · · · · · · · · · · ·	
		\$ 5.00 Certificate of Status (Optional)		