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(Requestor's Name)			
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Office Use Only



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TRANSMITTAL LETTER

TO:	Registration Se Division of Co					
SUBJE	CT: Xtrapartn	ers, LC		****		NA
		(Name of Limite	d Liab	ility Company)	•	
The end	closed Articles of	Organization and fee(s) are s	ubmitt	ed for filing.		
Please 1	eturn all corresp	ondence concerning this matte	er to th	e following:		
		Lar	ry A, [Danger		
		O	Vame o	f Person)		
		<u> </u>		ners, LC		
		(Firm/C	ompany)		
		8602		Point Court		
	(Address)					
	Tampa, FL 33647					
		(City)	State a	nd Zip Code)		
For furt	her information	concerning this matter, please	call:			
	Larry A	. Danger	at (813	230-404	0
	(Name	of Person)	. == ((Area Code &	Daytime Te	lephone Number)
Enclos	ed is a check fo	r the following amount:				
5 \$125	.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	Cer	\$155.00 Filing iffied Copy is en		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

7.3

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: 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 is:					
Xtrapartners, LC					
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability (Company is:			
Principal Office Address:	Mailing Address:				
8076 N. 56th Street	8602 Egret Point Court				
Tampa, FL 33617	Tampa, FL 33647				
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the r Larry A. D. Name	registered agent are:	os MAR 25			
	t Point Court dress (P.O. Box NOT acceptable)	ĩ			
Tampa,	20047	<u> </u>			
City, State, a		- 37 - 37			
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered Agent (Registered Agent)	this certificate, I hereby accept the appoints. I further agree to comply with the property of my duties, and I am familialistered agent as provided for in Chapter of the complex of the	ntment as visions of all ar with and			

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
MGR	Larry A. Danger				
	8602 Egret Point Court				
	Tampa, FL 33647				
* · · · · · · · · · · · · · · · · · · ·	والمراجع والمستحد والمراجع والمراجع والمراجع والمراجع والمستحد والمستحد والمراجع والم				
-					
(Use attachment if necessary) NOTE: An additional article must be	added if an effective date is requested.				
REQUIRED SIGNATURE:	Mary				
Signature of a member of 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.)					
	Larry A. Danger				
Турес	Typed or printed name of signee				
Kiling Rest					

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)