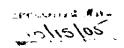
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## COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT:	and skate Int (Name of Limite	CONTIONAL, L. d Liability Company)	L.C
The enclosed Article	es of Organization and fee(s) are su	abmitted for filing.	
Please return all corr	espondence concerning this matte	r to the following:	
	James Patric	K MCCullo Name of Person)	rugh
Paln	n Beach Sch	Gol Board	
1231	West Brow	vard Stree	<i>t</i>
Lan	tava, FL (City)	3346 Q (State and Zip Code)	ZOOS DO
	, ,	- <b>-4</b>	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
For further information	on concerning this matter, please of	all:	
James P.	MCCollough me of Person)	at (56) 658 (Area Code & Daytime Tel	S-53673 lephone Number)
Enclosed is a check	for the following amount:		
□ \$125.00 Filing Fe	see \$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 Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	s

### COVER LETTER \*

TO: Registration Se Division of Con			
SUBJECT:	and skate. (Name of Limited	Liability Company)	L, L.C.
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Tames Patrice	k MC6//6	vgf
	(1)	lame of Person)	
	ands kate	Furterwa troval	, L.L.C.
	(1	-inn/Company)	•
1230	West B	Prowa ral Stro	ref
2		(,	
_ Lan	stana Fl	33462 State and Zip Code)	
<del> </del>	(City/	State and Zip Code)	
For further information of	concerning this matter, please c	all:	
	•		- (7/2)
(Name	of Person)	at (56/) 585 (Area Code & Daytime Te	lephone Number)
Enclosed is a check fo	r 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	s



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 19, 2005

JAMES PATRICK MCCULLOUGH PALM BEACH SCHOOL BOARD 1231 WEST BROWARD STREET LANTANA, FL 33462

SUBJECT: LANDSKATES INTERNATIONAL, LLC

Ref. Number: W05000047839

We have received your document for LANDSKATES INTERNATIONAL, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Returning as requested.

Enclosed is an application for refund. Please sign and return and allow at least 60 to 90 days for the refund to be processed.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 205A00063685

Please file the corrected enclosed documents.

Please apply the \$\frac{4}{130}\text{or} previousely received by you for the required fees

Ancesely,

James G. Mallef

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

#### **ARTICLE II - Address:**

**Principal Office Address:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

1231 W. Broward St Lantana FL 33462	1231 W. Broward St Lantana, FL 33462
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the reg	gistered agent are:
Kimes Patrick	MColleugh RECRESS
Name	TM 0
1231 W. Browar	d Street
Florida street addre	ess (P.O. Box NOT acceptable)
Lantava	FI 33460 5

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 Signature (REQUIRED)

(CONTINUED)

	Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
	MGRM	James Patrick McCollough 1231 West Broward Street Lantana, FL 33462
	MGR	Michael Alan MACDONALD 401 OCEAN Drive JUNO BEACH, FL 33408
(If an )		e of filing: 10/15/05 @PTIONAL) specific and cannot be more than five business days
prior to	o or 90 days after the date of filing.)	
	REQUIRED SIGNATURE:	12: 20 12: 20
	Sames Par	truck M'Eullous
	Signature of a member or	an authorized representative of a member.
	(In accordance with section of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)
	James Pat	rick MCUlough or printed name of signee

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

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)