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DEPARTMENT OF STATE
DIVISION OF COMPORATION

REFFECTIVE DATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Taproot Creative Group, 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:	
Sean Doughtie	
(Name of Person)	,, 1
Taproot Creative Group, LLC	
(Firm/Company)	<u>lear</u>
P.O. Box 182619	
(Address)	1
Tallahassee, FL 32318	
(City/State and Zip Code)	
For further information concerning this matter, please call:	Prince of the Control
Sean Doughtie at 850 309-1900	
(Name of Person) (Area Code & Daytime Telephone Number)	 .
Enclosed is a check for the following amount:	
\$125-00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\text{\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$160.00 Filing Fee} \$\$160.00 Fil	

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

Call when Ready

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Taproot Creative Group, LLC		
(Must end with the words "Limited Liability Compar	ny, "Limited Company" or their abbreviation "I	LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited	
Principal Office Address:	Mailing Address:	2007 JAN SECRET
203 N. Gadsden Street, Suite 7	P.O. Box 182619	35 E

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 of another business entity with an active Florida registration.)

Tallahassee, FL 32318

The name and the Florida street address of the registered agent are:

ARTICLE I - Name:

Tallahassee, FL 32301

The name of the Limited Liability Company is:

Sean Dougntie			_	_
	Name		y' 9	
4201 Glad Court				
Florida st	reet address (P.O. Box N	OT accep	table)
Tallahassee	FL	32303		
City,	State, and Zi	p		

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

1-3-07

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:	
MGRM	Sean Doughtie	
	4201 Glad Court	
	Tallahassee, FL 32303	
		
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(Use attachment if necessary)	SKY C	
(050 0000000000000000000000000000000000		P .
CLE V: Effective date, if other than the		riónal)
	e specific and cannot be more than five busine	ess days p
90 days after the date of filing.)		

REQUIRED SIGNATURE:

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.)

Sean Doughtie

Typed or printed name of signee

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)