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تمست	то:	Registration S Division of Co				
	-	4,			Constitution of the second	
	SUBJĖ	CT: Ked L	Oragon Martial Arts (Name of Limite	L.L.G. (1) A Company)	4	
			and the second	• • •/		
	The enc	losed Articles o	f Organization and fee(s) are s	ubmitted for filing.		
	Please re	eturn all corresp	ondence concerning this matte	er to the following:		
	6	Beau Noi	rgeot			
	_		. (Name of Person)		
	F	Red Drag	on Martial Arts			
(Firm/Company)						
22859 N. Sandalfoot blvd						
	_	(Address)				
	E	Boca Ra	ton FL 33428			
				/State and Zip Code)		
	For first	er information	concerning this matter, please			
	roi iuiu	ici illiolillation	-	Can:		
	Toby		เท ลของ พระ พระพาร	at (561) 929.53		
		`	of Person)	(Area Code & Daytime To	elephone Number)	
	Enclose	•	frithe following amount:		2007. SECI FALL/	
] \$125.€	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate of Status & Certified Copyrical (additional copy is, enclosed)	Section of the sectio
			Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE I - Name: The name of the Limited Liability Company is:
RED DRAGON MARTIAL ARTS LLC
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

Principal Office Address:

ARTICLE II - Address:

Mailing Address:

22859 N. Sandalfoot blvd	22859 N. Sandalfoot blvd		
Boca Raton	Boca Raton		
FL 33428	FL 33428		

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 or another business entity with an active Florida registration.)

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

Beau Norgeot		
	Name	
815 W. Boynto	n Beach	7-206
Flori	da street addı	ress (P.O. Box NOT acceptable)
Boynton Beach F	L 33426	FL
	City, State, ar	nd 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) Page 1 of 2

<u>Fitle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
MGR	Beau Norgeot
	815 W. Boynton Beach Blvd 7-206
	Boynton Beach FL 33426
MGR	Toby Waterman
· · · · · · · · · · · · · · · · · · ·	815 W. Boynton Beach Blvd 7-206
	Boynton Beach FL 33426
Use attachment if necessary)	
• ,	e date of filing: (OPTIO

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.)

Beau Norgeot

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)

Page 2 of 2

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