# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

- Fax Number

: (850)205-0383

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112 :-Phone : (302)575-0875

Fax Number : (302)575-0925

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JRETARY OF STATE AHASSEE, PLORIEM

# ELORIDA/FOREIGN LIMITED LIABILITY CO.

### Chop N Drop LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is: Chop N Drop LLC

#### ARTICLE !! ~ Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 12706 SW 216 St., Mlaml, FL 33170.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Agents and Corporations, Inc. 773 4th Avenue North, Stell El Naples, FL 34102

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. 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

ARTICLE IV - Management (Check box if applicable.) [

The Limited Liability Company is to be managed by one manager or mo managers and is, therefore, a manager - managed company.

ARTICLE V - Manager:

The initial Manager(s) of the Limited Liability Company shall be:

Jeffrey L. Miller

e 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.)

> Jeffrey L. Milier Typed or printed name of signee

# 0019609

## Florida Department of State Division of Corporations

Public Access System

## **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number : 075350000514

Phone: (727)442-1200

Fax | Tumber : (727)443-5829

ORIDA/FOREIGN LIMITED LIABILITY CO.

# ≅PLAN B EVENTS AND PROMOTIONS, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Audit Fax No: <u>#07000045</u> 48 63

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is: PLAN B EVENTS AND PROMOTIONS, L.L.C.

#### ARTICLE II - Address:

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

2711 W. Thornton Avenue Tampa, FL 33611

#### ARTICLE III - Written Operating Agreement

Any operating agreement entered into by the Members of the Limited Liability Company, and any amendments or restatements thereof, shall be in writing, and shall govern all matters relating to the governance of the affairs of the Limited Liability Company, the conduct of its business and the relations of its Members, including without limitation, the amendment of these Articles. No oral agreement among any of the Members or Managers of the Limited Liability Company shall be deen ed or constitute any portion of, or otherwise affect the interpretation of, any written operating agreement of the Limited Liability Company, as amended and in existence from time to time.

#### ART ICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Alan S. Gassman

Name

1245 Court Street, Suite 102
Florida street address (P.O. Box NOT acceptable)
Clearwater, FL 33756

City, State, and Zip

Having been ramed 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

ARTICLES OF ORGANIZATION OF PLAN B EVENTS AND PROMOTIONS, L.L.C.

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Alan S Gassman, Esquire 1245 Court Struct Suite 102 Clearwater, FL 33756 (727) 412-1200

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(An additional article must be added if an effective date is requested)

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.)

ALAN S. GASSMAN

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SECRETARY OF STATE

ARTICLES OF ORGANIZATION OF PLAN B EVENTS AND PROMOTIONS, L.L.C.

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