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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : 120010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

FLORIDA/FOREIGN LIMITED LIABILITY CO.

EPIK ADVENTURES LLC

Certificate of Status	0
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Electronic Filing Menu

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Help

H07000055121 3

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:
EPIK ADVENTURES LLC

ARTICLE II ADDRESS

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

950 NW 199TH TERR

PEMBROKE PINES FL 33029

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

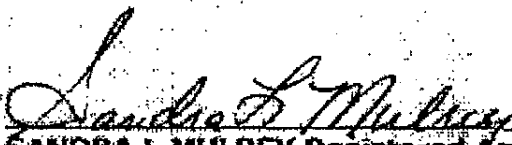
The name and the Florida street address of the registered agent are:

SANDRA L MULREY

950 NW 199TH TERR

PEMBROKE PINES FL 33029

Having been named as registered agent 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..



SANDRA L MULREY Registered Agent's Signature

H07000055121 3

PAGE 2 EPIK ADVENTURES LLC

H07000055121 3

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member-Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

SANDRA L MULREY

950 NW 199TH TERR

PEMBROKE PINES FL 33029

2007 MAR -1 A 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



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.

NAME OF SIGNER SANDRA L MULREY

Typed or printed name of signee

H07000055121 3