L07000024603

CTIVE DATE

(Requestor's Name)	
(Address)	
(Address)	-
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
	SFFI
(Business Entity Name)	-3
(Catalogue 2000)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
opeoid. Includes to 1 ming Chicon.	

Office Use Only



200089258182

03/05/07--01019--023 **125.00

07 MAR -5 PM 12: 52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAR - 6 2007

COVER LETTER

TO:	Registration Se Division of Co			
	T200			
SUBJE	CT: ///	(Name of Limited	OONING ADVENTURE Liability Company)	<u>5 22.C.</u>
The end	closed Articles of	f Organization and fee(s) are su	abmitted for filing.	
Please	return all corresp	ondence concerning this matter	r to the following:	
	MARK	FRITTE		
	7.7.7.	(1	Name of Person)	
	TRADICAL	POETTES RAILA	ONING ADVENTURE	·
	TROPICAL	BREETE S DIVERS	Firm/Company)	J CCL.
	128A TI	IRVEY ONACT (COUPT	
	12.00.10	TRICE T ROOM	(Address)	······································
	TALLANA	ISSEE FLORIDA	マコマ/フ	
	,00.,,,,,,	<i>SSEE , FLORIOA</i> (City)	State and Zip Code)	
For fur	ther information	concerning this matter, please	call:	
MAI	OK FRIT	7 <i>E</i>	at (<u>850</u>) <u>386-6</u> (Area Code & Daytime Te	6425
	(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclos	sed is a check fo	or the following amount:		
\$125	5.00 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 Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TROPICAL BREEZES BALLOONING ADVENTURES 22C (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
1280 TURKEY ROOST COURT TALLAHASSET, FL. 32317	1280 TURILEY ROOST COURT TALLAHASSET, FC. 32817
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.)	

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

Name

1280 TURKEY ROOST COURT

Florida street address (P.O. Box NOT acceptable)

TAILAHASSEE, FL. 32317

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)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:			
"MGR" = Manage "MGRM" = Mana				
MUR	MARK FRITTE 1280 TURKEY ROOST		_	
	TALLAHASSEE, FL. 323	<u> </u>	_	
	<u> </u>			
				
(Use attachment if				
n effective date is list	ate, if other than the date of filing: $MACH / 2007$. (ced, the date must be specific and cannot be more than five but			rior
r 90 days after the dat	e of filing.)	SECR TALLA	07 M	
REQUIRED SIG	NATURE:	ETAIR HASS)7 MAR -5	FILE
	Work Full	COP S	PH 12: 9	ËD
	Signature of a member or an authorized representative of a member.	₽ R	5	
	(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.)	DA.	52	
	MARK FRITZE			
	MARK FRITZE 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)