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J. BRYAN MAR - 8 2007

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Aegis Apporel, 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:
Roy+Tiffany Chesson
Aegis Apparel (Firm/Company)  70225 Tideview Ln.
76225 Tideview Ln. 5
Vulee, F_ 32097 (City/State and Zip Code)
For further information concerning this matter, please call:  (804) 239 - 5855 - Cell  Roy or Tiffany Chisson at (904), 225-5939 - business  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Mailing Address Street/Courier Address  Registration Section Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Acgis Apparel  (Must end with the words "Limited Liability Company, "Limited"	
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
76225 Tideview Ln. Julee, FL 32097	JUZZ5 Tideview Ln. Julee, FL 32097
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  The name and the Florida street address of the re	red Agent. You must designate an individual or another
Tiffany Ros Name	e Chesson  The Son  T
TUZZS Tidey Florida street addr	ess (P.O. Box NOT acceptable)
Lulee City, State, ar	FL 32097 nd Zip
Having been named as registered agent and to a	ccept 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..

(CONTINUED) Page 1 of 2

A Agent's Signature (REQUIRED)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Roy David Chesson  76225 Tideview Ln.  Yulee, Fl 32097
MGR	Tiffany Rose Chesson Juzzs Tideview Ln. Julee, FL 32097
	O7 HAR -7
	R - 7 PM
(Use attachment if necessary)	PM 12: 57
CLE V: Effective date, if other than the dateffective date is listed, the date must be s 0 days after the date of filing.)	
REQUIRED SIGNATURE:	

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

and R. Chesson Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)