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SECRETARY OF STATE FALLAHASSEE. FLORIDA

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COVER LETTER

O: Registration Section Division of Corporations	
UBJECT: Sunday Huddle L.L.C. (Name of Limited Liability Company)	
he enclosed Articles of Organization and fee(s) are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Greg Wheeler (Name of Person)	
· · · · · · · · · · · · · · · · · · ·	
Fat Cat Entertainment /nc	
350 S. Osceola Ave #/	
(Address)	
Orlando FL 32801 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
For further information concerning this matter, please call: Cry Wheeler at 407 267-2743 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount:	
(Mea code & Daytimo Felephone Plantoct)	0
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & Bildo.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &	
(additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Street/Courier Address 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:

Sunday Huddle		
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
350 S Osceola Ave #1 Orlando, FL 32801	350 S OSceola Ave #1 Orlando, PC 32801	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registationsess entity with an active Florida registration.)		
The name and the Florida street address of the re	egistered agent are:	
Greg Wheel Name 350 S. Osce	Pola Ave #1 Iress (P.O. Box NOT acceptable)	i F C
liability company at the place designated in to registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all arformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S	

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM - Managing Member	Greg Wheeler 350 S Osceola Ave #1 Oclando FZ 32801
MGR	Gordon Chan 319 Sonoma Valley Circle Orlando, FL 32835
	07 JUN 1
(Use attachment if necessary)	SSEE FLORID
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spot or 90 days after the date of filing.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior
required signature:	
(In accordance with section of this document constitutes that the facts stated herein	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.) Melever 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)