L0700086876

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Og .				

Office Use Only

FFFECTIVE DATE 8-2307



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SECRETARY OF STATE
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CÖVER LETTER

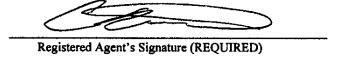
10:	Division of Co				
SUBI	ECT. HIGH	KONCEPTS, LI	_C		
3020	ECT.		Liability Company)	4 - 2 4 14 4 14 4 14 14 14 14 14 14 14 14 14	
The ei	nclosed Articles of	Organization and fee(s) are su	bmitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
	Craig Bla	nton			
		0	lame of Person)		_
	which are a distants a series and a	· (1	Firm/Company)	SE TAL	
2413 Bayshore Blvd #301					
			(Address)		
	Tampa, F		State and Zip Code)	. F. S. T. S	
		(Chy/	state and hip Code)	ATF. RIDA	-
For fu	rther information o	concerning this matter, please of	ail:	•	
Craig Blanton			435-90 at (407)		
	(Name	of Person)	(Area Code & Daytime Te	elephone Number)	•
Enclo	sed is a check for	r the following amount:			
⊒\$ 125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	3\$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 Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	ns ·	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
HIGH KONCEPTS, LLC (Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	y company, sizion, or azzer,	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
2413 Bayshore Blvd #301 Tampa, Fl 33629	2413 Bayshore Blvd #301 Tampa, Fl 33629	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another	
The name and the Florida street address of the re		
Craig Blanton	ASSE	
Name	vd #301 FLOR TO THE PROPERTY OF THE PROPERTY O	
2413 Bayshore Bl	vd #301 등 전	
	ress (P.O. Box NOT acceptable)	
<u>Tampa, Fl 33629</u>	FL	
City, State, a	nd Zip	
Having been named as registered agent and to a	accept service of process for the above stated limited	

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..



EFFECTIVE DATE 8 2307 (CONTINUED)
Proce 1 of 2

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" = Managir	Name and Address:	
MGRM	Craig Blanton 2413 Bayshore Blvd #301 Tampa, Fl 33629	
MGRM	Carolina Blanton 2413 Bayshore Blvd #301 Tampa, Fl 33629	

	, if other than the date of filing: 08/16/2007. (OPTIONAL) the date must be specific and cannot be more than five business days pri	ior
REQUIRED SIGNA	ATURE:	
	ALL AHAT TO A member of a memb	
(In	nature of a member of an authorized representative of a member. (2) (2)	71000
<u>C</u>	Craig Blanton Typed or printed name of signee	and I

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)