407000105861

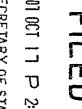
(Requestor's Name)
(Address)
(Address)
(nucless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800110828828

10/17/07--01048--009 ++155.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hi- Impact Pronotions 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:
Douglas R. BEHr (Name of Person)
(Name of Person)
Hi-IMPACT Promotions LLC (Firm/Company)
(Firm/Company)
7441 ANADALE Circle PER 8
Lake Worth Floring 33467 (City/State and Zip Code) (City/State and Zip Code)
(City/State and Zip Code)
(City/State and Zip Code) (City/State and Zip Code) For further information concerning this matter, please call:
Douglas R. BEhr at (561) 641-7758 (Name of Person) (Area Code & Daytime Telephone Number)
(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 & S155.00 Filing Fee & S160.00 Filing Fee,} \\ \text{Certificate of Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Certified Copy} \text{(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 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:

Hi- Impact Pronotions LLC		
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal office	e of the Limited Liability Company is:	
Principal Office Address: Mailing A	ddress:	
7441 Anadale Circle 7441 LAKE WORTH FLORIDA LAKE 33467 33467	ANADALE Circle WORTH FLORIDA	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)		
The name and the Florida street address of the registered ag	3700	
Douglas Behr	OCT 17 P HASSEE, FL	
	• '0	
7441 ANADALE Circle	To P	
Florida street address (P.O. Box	NOT acceptable	
	3467 AT 5	
City, State, and Zip		
Having been named as registered agent and to accept service liability company at the place designated in this certificate registered agent and agree to act in this capacity. I further a statutes relating to the proper and complete performance of accept the obligations of my position as registered agent to	e, I hereby accept the appointment as gree to comply with the provisions of all f my duties, and I am familiar with and as provided for in Chapter 608, F.S	

(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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Douglas R. Behr
	1441 ANADALE Circle
	LAKE WORTH, Florida 33467
MGR	DONNA L. Behr
	7441 ANADALE Circle
	LAKE WORTH Florion 33467
	SEC SEC
(Use attachment if necessary)	P ∪ OI
•	
ARTICLE V: Effective date, if other than	the date of filing: November 1st 2007. (OPTIONAL)
(If an effective date is listed, the date mu	st be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
,	
<u>REQUIRED</u> SIGNATURE:	•
	reglas R. Behr
Signature of a me	mber or an authorized representative of a member.
(In accordance wit	h section 608.408(3), Florida Statutes, the execution
of this document c	onstitutes an affirmation under the penalties of perjury
that the facts sta	ted herein are true.)

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)

Typed or printed name of signee