

## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

happy feet unlimited, Ilc

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Estimated Charge	\$155.00

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Corporate Filing Menu

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE I - Name: he name of the Limited Liability Company is:	Liability Company is:
Happy Feet Unlimited, LLC.	limited, LLC.
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC."	with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Addre	<b>35:</b>	Mailing Address:
3531 Griffin Road Ft. Lauderdele, FL 33312		3531 Griffin Road  Ft. Lauderdale, FL 33312
ARTICLE III - Registr (The Limited Liability Company business ontity with an active I	y cannot serve as its own Registe	Office, & Registered Agent's Signature, 22 and Agent, You must designate an individual or annual agent.
The name and the Florid	is street address of the re	- (_)
<u>Ma</u>	x M. Hagen	39
<del></del> -	Name	

3531 Griffin Road

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

Ft. Lauderdale, FL 33312
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited llability 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 propided for in Chapter 608, F.S.,

Registered Agent's Signature (REQUIRED)

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EMPIRE CORP KIT

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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	Name and Address:
"MGRM" = Managing Member	
MRG	ROBERTO L. COALLA JR. 3531 Griffin Road
	Ft. Lauderdale, FL 33312
MGRM	Eric J. Coella
	3531 Griffin Road
	Ft. Lauderdale, FL 33312
	-1. 2
	PARC I
	TE CT
(Use attachment if necessary)	SECTE ART TAILLAHASS
(Coo managent is noccessary)	E P
ICLE V: Effective date, if other tha	ut the date of filing: (OPTIONAL)
effective date is listed, the date in	ust be specific and cannot be more than five business they prior
90 days after the date of filing.)	NO.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(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.)

Roberto L. Coalla Jr.

Typed or printed name of signee

Filing Fors:

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

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

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