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EXAMINER

COVERLETTER

	Registration Section Division of Corporations	
CUDIFC	ր։ What's Your Passic	on. LLC.
SUBJECT		imited Liability Company)
The enclos	sed Articles of Organization and fee(s)	are submitted for filing.
Please retu	urn all correspondence concerning this	matter to the following:
С	hristopher M. Scott	
		(Name of Person)
		(Firm/Company)
8	11 Tuscanny St	
		(Address)
В	randon, FL, 33511	
		(City/State and Zip Code)
For further	r information concerning this matter, pl	lease call:
Christ	(Name of Person)	lease call: at (813) 655.9084 (Area Code & Daytime Telephone Numbering St. 1988) (Area Code & Daytime Telephone Numbering St. 1988)
Enclosed	is a check for the following amount	
\$125.00	Filing Fee \$130.00 Filing Fee Certificate of Status	
	Mailing Address Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

What's Your Passion, LLC. (Must end with the words "Limited Liability or Limited Liability or Liability or Limited Liability or Liabili	ity Company, "L.L.C.," or "LLC.")
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:
811 Tuscanny St., Brandon, FL 33511	811 Tuscanny St., Brandon, FL 33511
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the rescription o	ered Agent. You must designate an individual of another the segment are:
Brandon, FL, 3351	
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered 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	Name and Address:	
"MGRM" = Managing Member		
MGRM	Christopher M. Scott	_
	811 Tuscanny St.	.
	Brandon, FL, 33511	- -
MGRM	Sandra D. Christopher	
	30877 USF Holly Dr.	_
	Tampa, FL, 33620	-
		_
		-
		•
(Use attachment if necessary)		
•	0/40/0000	
ARTICLE V: Effective date, if other than the		
to or 90 days after the date of filing.)	be specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be specifically and cannot be specific and cannot be spe	days prior
	ASSA	N 20
REQUIRED SIGNATURE		
(/)	STATE	PH 1: 09
Signature of a memb	ber or an authorized representative of a member.	w
(In accordance with s of this document con- that the facts stated	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)	
<u>Christophe</u>		
T	vped or 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)