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To:

Division of Corporations
Fax Number : (850) 617-6383

L. SELLERS

JUL 17 2008

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

EXAMINER

FLORIDA/FOREIGN LIMITED LIABILITY CO.

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**ARTICLES OF ORGANIZATION
OF
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ARTICLE I NAME

The name of the limited liability company shall be: **powered by feel llc**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
4430 SW 84th Way, Gainesville, Florida 32608.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1203
Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of
Leon.


ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2048.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and
addresses of the members of the Limited Liability Company are:

Ronnie Lowenthal, 4430 SW 84th Way, Gainesville, Florida 32608
Jennifer Toomy, 5211 SW 91st Terrace, Suite D, Gainesville, Florida 32608
Douglas Newburg, 5400 NW 39th Ave., Suite H46, Gainesville, Florida 32600



Business Filings Incorporated, Organizer
Mark Williams, A.V.P.
Authorized Representative

Date: July 14, 2008

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717
(608) 827-5300

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**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **powered by feel llc**

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: _____



Mark Williams, A.V.P. Business Filings Incorporated

Date: *July 14, 2008*

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