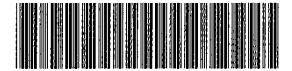
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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Dusiness Fath, News)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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SECRETARY OF STATE

TALL AHASSEE FOR STATE

D. BRUCE

AUG 5 2008

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJE						
	(Name of Limited Liability Company)					
The en	nclosed Articles of Organization and fee(s) are submitted for filing.					
Please	return all correspondence concerning this matter to the following:					
	John Herman					
	(Name of Person)					
	FlipFlopFishingLLC.					
	(Firm/Company)	<del>,, ,</del>				
	11000 S. Ocean Dr. #1-H					
	(Address)					
Jensen Beach, Florida 34957						
	(City/State and Zip Code)	<del></del>				
(City/State and Zip Code)  For further information concerning this matter, please call:  John Herman  at (772 ) 812-1706						
Johr		177 J				
	(Name of Person) (Area Code & Daytime Telephone Number)	7				
Enclos	sed is a check for the following amount:					
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)						
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE 1 - Name:** 

FlipFlopFishingLLC.		
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	
11000 S. Ocean Dr. #1-H	11000 S. Ocean Dr. #1-H	
Jensen Beach, Florida 34957	Jensen Beach, Florida 34957	
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		al or another
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	n Registered Agent. You must designate an individu	all or another
The Limited Liability Company cannot serve as its own	n Registered Agent. You must designate an individu	al or another  OB AUG  LAHAS
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of John Herman	n Registered Agent. You must designate an individu	al or another  OB AUG - L  AHASSEE
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of John Herman	n Registered Agent. You must designate an individu  f the registered agent are:  Name	al or another  OB AUG - L  AHASSEE
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of John Herman  11000 S. Ocean	n Registered Agent. You must designate an individu  f the registered agent are:  Name	al or another  OB AUG - L  AHASSEE
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of John Herman  11000 S. Ocean	f the registered agent are:  Name  Dr. 1-H	al or another  TALLAHASSEE

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..

Registered Agent's Signature (REQUIRED)

(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:

•	Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
	MGR	John Herman
		11000 S. Ocean Dr. 1-H
		Jensen Beach, Fl 34957
		#*************************************
	(Use attachment if necessary)	
(If an	CLE V: Effective date, if other than the effective date is listed, the date must be 00 days after the date of filing.)	date of filing: date of filing (OPTIONAL) especific and cannot be more than five business days prior
	REQUIRED SIGNATURE:	
	Ilu Il	In .
	Signature of a member	r or an authorized representative of a member.
	(In accordance with sec of this document consti- that the facts stated he	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)
	John Herman	Six to live
	Ty	ped 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)