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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

FILED
09 MAR -6 AM 9:04
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

AMERICA GAMES & TOYS ETC, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

D. BRUCE

MAR 9 2009

EXAMINER

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Corporate Filing Menu

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BLUMBERGEXCELSIOR
JUN-25-2005 07:09P FROM:
BLUMBERGEXCELSIOR

Fax:888-892-9256
FAX:000-000-0000

Mar 6 2009 12:14 P.02
TO:18886929256
Feb 26 2009 11:54 P.02 P.2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMERICA GAMES & TOYS ETC, 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 of the Limited Liability Company is:

Principal Office Address:

4450 URBANA DRIVE., #110
ORLANDO, FL 32837

Mailing Address:

4450 URBANA DRIVE., #110
ORLANDO, FL 32837

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 agent are:

CRAIG HERMAN

Name

4450 URBANA DRIVE., #110

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

ORLANDO FL 32837

City, State, and Zip

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.

X

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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BLUMBERGEXCELSIOR
JUN-25-2005 07:09P FROM:
BLUMBERGEXCELSIOR

Fax: 888-692-9256
FAX: 888-692-9256

Mar 6 2009 12:15
TO: 18886929256
Feb 28 2009 11:55

P.03
P.3

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:

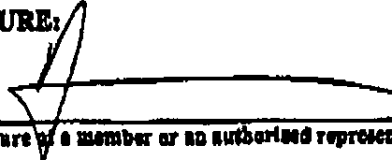
MGRM

CRAIG HERMAN
4450 URBANA DRIVE, #110
ORLANDO, FL 32807

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

X 

Signature of a member or an authorized representative of a member.
(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
CRAIG HERMAN

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 20.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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