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Division of Corporations
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To:

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

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-03462009 MAR 27 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.**RAIN BARREL TREASURES, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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MAR 30 2009

EXAMINER

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March 26, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT CORPORATE OUTFITS

SUBJECT: RAIN BARREL TREASURES, LLC
REF: W09000014127

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on March 25, 2009. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist IIFAX Aud. #: H09000069795
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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RAIN BARREL TREASURES, 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:

86700 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

Mailing Address:

86700 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

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:

DANIEL M. KEIL, P.A.

Name

6500 COWPEN ROAD, SUITE 301

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

MIAMI LAKES

FL

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MANAGER

MICHAEL R. BAKER

86700 OVERSEAS HIGHWAY

ISLAMORADA, FL 33036

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 3/12/09 (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:


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.)

MICHAEL R. BAKER

Typed or printed name of signer

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2009 MAR 27 AM 8:44
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TALLAHASSEE, FLORIDA

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)