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09 MAY 28 PM 1:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

MAY 29 2009

EXAMINER

MyCorporation

An Intuit Company

21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

intuit

Toll-Free: 888-692-6771 | Direct: 818-436-8225 | FAX: 818-879-8005  
E-mail: [info@mycorporation.com](mailto:info@mycorporation.com)

## ROUTINE SERVICE FILING REQUEST

Friday, May 08, 2009

Division of Corporations  
Florida Department of State  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
09 MAY 28 PM 1:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Re:   *Salted Slug LLC***

Ladies and Gentlemen:

Please find enclosed for filing Articles of Organization for the above referenced company.

Enclosed is a check in the amount of \$155.00 for filing and for a **certified copy**.

Please return the **certified copy** to the address below.

Thank you for your assistance.

Sincerely,

MyCorporation, an Intuit Company  
**Attn: Fulfillment Dept.**  
21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

**Articles of Organization  
For  
Salted Slug LLC  
Florida Limited Liability Company**

**FILED**  
09 MAY 28 PM 1:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is Salted Slug LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

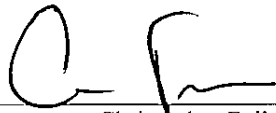
1247 SW 46th Avenue  
Suite 1312  
Pompano Beach, FL 33069

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Christopher Fullman  
1247 SW 46th Avenue  
Suite 1312  
Pompano Beach, FL 33069

*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.*



Christopher Fullman, Registered Agent

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Christopher Fullman  
1247 SW 46th Avenue Suite 1312  
Pompano Beach, FL 33069



Meghan Record, Organizer