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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W09-27451

J. BRYAN
JUN 1 8 2009
EXAMINER

COVER LETTER

TO:	Registration S Division of Co							
SUBJI	ECT:	On-L	ine Barga	ains, LLC				
	Name of Limited Liability Company							
The en	closed Articles o	of Organization and fee(s) are	submitted for :	filing.				
Please	return all corresp	pondence concerning this matt	er to the follo	wing:				
		(Gary Cramo					
			Name of Perso	n				
		On-LI	ne Bargain	s, LLC			••	
			Firm/Company			SE SE		
		2213 A	2213 Andrea Lane #105			09 JUN 16 PH SECRETARY OF TALLAHASSEE. F		
			Address			AR)	2 L	
		Fort	Myers, FL	33912		EE.	로 !	
			y/State and Zip			- F07	կ ։ 52	
		asc	otcrew@ac	ol.com		RICK	25	
		E-mail address: (to be used f	or future annual	report notifica	tion)			
For fu	ther information	concerning this matter, please	call:					
	Gar	y Cramer	at (239)	454-5900)		
	Name	of Person	Area	Code & Daytin	ne Telephone Num	nber		
Enclos	sed is a check for	or the following amount:						
]\$125	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	Filing Fee & Copy copy is enclose	ed) Certifie	Filing Fee cate of Statued Copy and copy is end	ıs &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regis Divis Clifto 2661	et/Courier Ad stration Section sion of Corpor on Building Executive Ce hassee, FL 32	rations enter Circle			



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 11, 2009

GARY CRAMER ON-LINE BARGAINS, LLC 2213 ANDREA LANE #105 FORT MYERS, FL 33912

SUBJECT: ON-LINE BARGAINS, LLC

Ref. Number: W09000027451

PILED

99 JUN 16 PM 4: 52

SECRETARY OF STATE
SECRETARY OF STATE

We have received your document for ON-LINE BARGAINS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 June 10, 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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 409A00019772

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:						
gains, LLC						
iability Company," "L.L.C.," or "L.LC.")						
e principal office of the Limited Liability Company						
Mailing Address:						
2213 Andrea Lane #105						
Fort Myers, FL 33912						
red Office, & Registered Agent's Signature: Legistered Agent. You must designate an individual or another the registered agent are: Cramer Image: LCRR ARTIARY ASSET ARTIARY P.O. Box NOT acceptable)						
12 _{FL}						
te, and Zip						
to accept service of process for the above stated limite in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of e performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S						

(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	Name and Address:
"MGRM" = Managing Member	
MGR	Gary Cramer 2213 Andrea Lane #105 Fort Myers, FL 33912
	TECH S TO
· · · · · · · · · · · · · · · · · · ·	A SSE
	EFFS TO
(Use attachment if necessary)	gm N
	ust be specific and cannot be more than five business days pr
REQUIRED SIGNATURE:	
Signature of a n	nember or an authorized representative of a member.
of this documen	rith section 608.408(3), Florida Statutes, the execution t constitutes an affirmation under the penalties of perjury ted herein are true.)
	Gary Cramer Typed 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)