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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

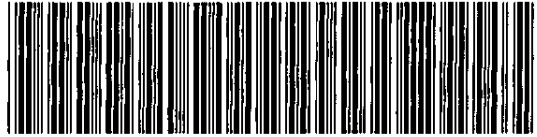
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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M. THOMAS

SEP 15 2009

EXAMINER

September 4<sup>th</sup>, 2009

Florida Dept. of State  
Division of Corporations.  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

MINA GRACE  
3131 Waterside Circle  
Bryantwood Blvd, FL  
33435  
(586) 258-6470.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

To whom it may concern:

Please accept the enclosed Articles of Incorporation for the "Florida Athletic Apparel" corporation. The address & phone are the following:

Florida Athletic Apparel  
3131 Waterside Circle  
Bryantwood Blvd, FL 33435  
586.258.6470.

Sincerely,  
Mina Grace

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Florida Athletic Apparel  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mina Grace  
Name of Person

Florida Athletic Apparel  
Firm/Company

3131 Waterside Circle  
Address

Boynton Beach, FL  
City/State and Zip Code

FloridaAthleticApparel@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mina Grace at ( 586 ) 258-6470  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Florida Athletic Apparel Limited Liability Company

(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:

3131 Waterside Circle  
Boynton Beach, FL 33435

#### Mailing Address:

3137 Waterside Circle  
Boynton Beach, FL 33435

### 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 other business entity with an active Florida registration.)

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

Mina Grace

Name

3131 Waterside Circle

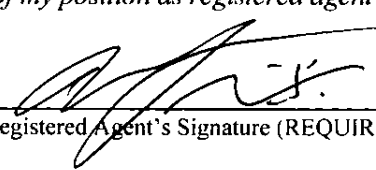
Florida street address (P.O. Box **NOT** acceptable)

Boynton Beach, FL 33435

City, State, and Zip

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TALLAHASSEE, FLORIDA

*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)

**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

Mina Grace

3131 Waterside Circ.  
Bogota Beach, FL 33435

MGRM

Amy Fahmy

3138 Waterside Circ.  
Bogota Beach, FL 33435

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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:**

  
\_\_\_\_\_  
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.)

Mina Grace  
\_\_\_\_\_  
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)**