Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000023029 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

two 2 read, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

J. BRYAN

FEB - 3 2009

https://efile.sunbiz.org/scripts/efilcovr.exe

EMPIRE CORP KIT

302233626

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

## TWO 2 READ, LLC

### **ARTICLE I**

The name of the Limited Liability Company shall: TWO 2 READ,

# FILED AN 8: 28 SECRETASSEE FLORE

### **ARTICLE II**

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

### **ARTICLE III**

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

9100 S. DADELAND BLVD., SUITE 1600 MIAMI, FLORIDA 33156

### **ARTICLE IV**

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

9100 S. DADELAND BLVD.,SUITE 1600 MIAMI, FL 33156

### ARTICLE V

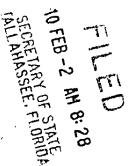
The name of the Managing Members are: MILES BUNDER, ALIDA BUNDER

H10000023029

H10000023029

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

(Name of Company)



Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

Registered Agent

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.)

Leslie Adler
Typed or printed name of signee

H10000023029

9696889908 97:71 0102/20/20

EMPIRE CURP KIT