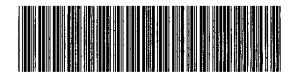
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SECRETARY OF STATE

J. BRYAN

MAR - 9 2009

EXAMINER

## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations					
SUBJECT: Robin Writes and Draws, LLC					
Name of Limited Liability Company					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence co	ncerning this matter to	the following	:		
Robin Liedtke					
	Nam	e of Person			
	, Firm	n/Company		Þs	=
2555 Adelia Blvd.				LAH	10 MAR
		Address		ASSI	8 r
Deltona, FL 32725				m <sub>Q</sub>	고 [
	City/Star	te and Zip Code	;	STA OR A	<del>' ; 5</del> '
robinliedtke@gmail.co	om ddress: (to be used for fu	hura annual rana	at notification)	<del>g</del> m	<u> </u>
For further information concerning		_	nt nouncetion)		
Robin Liedtke	at (	954	812-4551		
Name of Person	•		& Daytime Tele	phone Number	
Enclosed is a check for the follo	wing amount:				
□\$125.00 Filing Fee \$\frac{1}{2}\$\$130.0 Certific	cate of Status	6155.00 Filin Certified Copy (additional copy	py	\$160.00 Filing For Certificate of State Certified Copy (additional copy is e	tus &
Registrat Division P.O. Box	Address ion Section of Corporations x 6327 see, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding centive Center Cee, FL 32301		

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	ny is:			
Robin Writes and Draws, LLC				
(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")		-	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited L	iability	Comp	pany is:
Principal Office Address:	Mailing Address:			
2555 Adelia Blvd. Deltona. FL 32725	2555 Adelia Blvd. Deltona, FL 32725		<del></del>	
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)				
The name and the Florida street address o	f the registered agent are:	SECR	5 H	ምም/ርዝ <sub>ነ</sub>
Robin Liedtke		E E	MAR -	
	Name	TARY OF STATE ASSEE, FLORIDA	ά.	<u> </u>
2555 Adelia Blvd.		£04	2	
Florida str	reet address (P.O. Box NOT acceptable)	101. 71.S	ယ္	O
Deltona	FL32725		57	
(	City, State, and Zip	<b>₽</b>		

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

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR		
wigh		Robin Liedtke 2555 Adelia Blvd
		Deltona. FL 32725
Manuforant art 1		
	·	
	<u> </u>	PAR AHA
	<del></del>	SSE &
		Mo n
(Use attachmen	t if necessary)	STATE LORID
LE V: Effective	e date, if other than the o	late of filing:OPTIO
ffective date is li	isted, the date must be	specific and cannot be more than five business
days after the	date of filing.)	
PEOHIPEDS	IGNATURE:	

Robin T. Liedtke

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

### 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)

that the facts stated herein are true.)