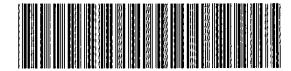
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## **COVER LETTER**

TO:

Registration Section

Division of Corporations			
SUBJECT: Pride Ma	rketing (	Troup, LLC iability Company	
The enclosed Articles of Organization	on and fee(s) are subn	nitted for filing.	
Please return all correspondence con	ocerning this matter to	the following:	
Justin Mi	Iton	ne of Person	#s 5
Pride Marke			JUL 14 P
_		Address	PM 12: 32
Tallahassee,	FL 3230 City/Sta	3 te and Zip Code	<b>&gt;</b>
produmar Keting	group e an	Mail. (Dm ture annual report notification)	
For further information concerning the			
Justin Milton Name of Person	at (	(850 ) 508 - 2 Area Code & Daytime Teleph	0748 none Number
Enclosed is a check for the follow	ving amount:		
■\$125.00 Filing Fee □\$130.00 Certification	ate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box	on Section of Corporations	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Pride Marketing Group, L.  (Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3298 Woodhill Dr. Tallahassee, FL 32303	Same
ARTICLE III - Registered Agent, Registered Control (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ed Agent. You must designate an individual or another
Name	
	, Eggs in

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

Title: "MGR" = Manager "MGRM" = Managir	Name and Address: ng Member	
MGRM	Justin Milton 3298 Woodhill Dr Tallahasse, FC 32303	- -
MGRM	Bonnie Venclauskas 3298 Woodhill Dr. Tallahassa, Fl 32303	
		· ,
(Use attachment if ne	ecessary)	
CLE V: Effective date,	the date must be specific and cannot be more than five business of filing.)	NAL) days prior
CLE V: Effective date, effective date, of days after the date of t	the date must be specific and cannot be more than five business of filing.)  ATURE:	NAL) days prior
CLE V: Effective date, effective date is listed, 00 days after the date of REQUIRED SIGNATION Sign (In of t	the date must be specific and cannot be more than five business of filing.)	days prior
CLE V: Effective date, effective date is listed, 00 days after the date of REQUIRED SIGNATION Sign (In of t	nature of a member or an authorized representative of a member.  accordance with section 608.408(3), Florida Statutes, the execution this document constitutes an affirmation under the penalties of perjury at the facts stated herein are true.)	NAL) days prid