10000099021

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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08/30/10--01013--018 **125.00



T. HAMPTON SEP 2 2 2010 EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJECT: Froggy's Pad					
		Name of Limit	ted Liability Company		
The end	closed Articles o	of Organization and fee(s) are	submitted for filing.		
Please	return all corresp	pondence concerning this mat	ter to the following:		
	Donald Bonn	eau			
			Name of Person		
	Froggy's Pad				
			Firm/Company		
-	2814	1 N. 96th	Ave Apt 477		
		- 0	Address		
_	J.	Dogwed, FL	33021		
		Cit	y/State and Zip Code		
donbonneau1@yahoo.com					
		E-mail address: (to be used i	for future annual report notification)		
For furt	ther information	concerning this matter, please	e call:		
Donald Bonneau			at (813)4958008		
	Name	of Person	Area Code & Daytime Telep	hone Number	
Enclose	ed is a check for	or the following amount:			
⊒\$ 125.0	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 Ci Tallahassee, FL 32301		



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 SEP 21 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 31, 2010

DONALD BONNEAU 2814 N 46TH AVE APT 477 HOLLYWOOD, FL 33021

SUBJECT: FROGGY'S PAD Ref. Number: W10000041057

We have received your document for FROGGY'S PAD and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." 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) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 310A00020822

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Froggy's Pad	(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - A		principal office of the Limited Liability Company is:	
Principal Office	e Address:	Mailing Address:	
A8121 N. Hollywood	. 416th Ave Apt 477 .FL 33021	2814 N. 46th Ave Dot 477 Hollywood, FL 33021	
(The Limited Liability		ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another	
The name and th	e Florida street address of the	e registered agent are:	
The name and th	e Florida street address of the Don Bonneau Nam		
The name and th	Don Bonneau	ne	
The name and th	Don Bonneau Nam 2814 N. 46th Ave Apt 4	ne	
The name and th	Don Bonneau Nam 2814 N. 46th Ave Apt 4	77	
The name and th	Don Bonneau Nam 2814 N. 46th Ave Apt 4 Florida street a Hollywood	77 address (P.O. Box <u>NOT</u> acceptable)	

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

BIAIDION SOUTH

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
MGR	Donald Bonneau 2814 N. 46th Ave Apt 477 Hollywed, FL 33021				
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·				
	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior				
REQUIRED SIGNATURE:					
Donald Sowneau Signature of a member or an authorized representative of a member.					
(In accordance with section of this document constitute	(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.)				
Donald Bonneau					
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)