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SECRETARY OF STATE





FLORIDA DEPARTMENT OF STATE Division of Corporations

August 31, 2010

JASON WARD 11837 TEMPLETON ROAD JACKSONVILLE, FL 32258

SUBJECT: THE LEAP, LLC Ref. Number: W10000041076

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

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on August 30, 2010. Please amend your document accordingly.

The name designated in your document is unavailable since it is the same as or it is not distinguishable from the name of an existing entity. Section 608.406; Florida Statutes, was amended effective July 1, 2007, to require the name of all imited liability company to be distinguishable from the names of all other fillings, filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note 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.

The document number of the name conflict is M77556.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 210A00020847

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SECTETARY OF STATE
SECTETARY OF STATE

COVER LETTER

TO:	Registration Division of C			
SUBJ	ECT: The Le			
		Name of Limi	ted Liability Company	
The er	nclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	tter to the following:	
	Jason Ward			
			Name of Person	
	The Leap, LL	.c		
			Firm/Company	
	11837 Templ	eton Road		
			Address	Fo 20
	Jacksonville,	FL 32258		2019 AUG 30 SEGRETAR TALLAHASS
		Ci	ty/State and Zip Code	王 6
	Ward73@gm			30
		E-mail address: (to be used	for future annual report notification)	PH PH
For fu	rther information	concerning this matter, pleas	e call:	PHE: 49 OF STATE EF. FLORID
Jasor	n Ward		at (904) 599-0886	` >
	Name	of Person	Area Code & Daytime Telephone Nu	mber
Enclos	sed is a check for	or the following amount:		
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	O Filing Fee, icate of Status & ied Copy onal 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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is	:
The Leap, LLC (Must end with the words "Limited Liability of the Leap, Inc.)	Jeddings and Events, LLC ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own Registeres business entity with an active Florida registration.) The name and the Florida street address of the substraction and the Florida street address of the substraction.	stered Agent. You must designate an individual or afforther
Name	
11837 Templeton Road Florida street add	dress (P.O. Box <u>NOT</u> acceptable)
Jacksonville City, St	FL 32258 rate, and Zip

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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Christina L Ward
	11837 Templeton Road, Jacksonville FL 32258
MGRM	Jason Ward
	11837 Templeton Road, Jacksonville FL 32258
	AND
(Use attachment if necessary)	SSE SSE
TEV. Effective data if other than the	ne date of filing: 22-2010 (OPTIONAL
CLE V: Effective date, if other than the frective date is listed, the date must	be specific and cannot be more than five business days
days after the date of filing.)	- To

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.)

Jason Ward

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)