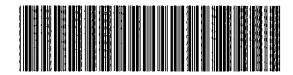
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(F	Requestor's Name)		
(/	Address)		
	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(i	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions t	to Filing Officer:		

Office Use Only



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Effective Date /_/- 2011

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J. SAULSBERRY EXAMINER DEC 2 2010

COVER LETTER

Division of Corp					
_{subject:} You're	The News LLC				
		d Liability Compar	ny		
The enclosed Articles of 0	Organization and fee(s) are s	submitted for filing.			
Please return all correspon	ndence concerning this matte	er to the following:			
Richard T	. Sanetti				
		Name of Person			
You're The	e News LLC			•	
		Firm/Company		· · · · · · · · · · · · · · · · · · ·	
PO Box 25	5506		, ,		
		Address			
0		•			
Sarasota Flo		/State and Zip Code		D N	
adamjoseph?	74@yahoo.com	ristate and Zip Code		2010 DEC - AM II: 2	mbiosny r
	E-mail address: (to be used for	or future annual repor	t notification)	TASS	*****
For further information co	oncerning this matter, please	call:			7. 1). Exercise
Adam Joseph		_ 44 \	342 3237	<u> </u>	P or Market No.
Name of	Person	Area Code	& Daytime Telephone Numbe	28 28 E	
Enclosed is a check for	the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y Certificat is enclosed) Certified	Filing Fee, e of Status & Copy copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

You're The Ne		nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addre	ess:		
The mailing address a	nd street address	of the principal office of the Limited Lia	ability Company is:
Principal Office Add	ress:	Mailing Address:	
665 Beach Road		PO Box 25506	
Sarasota Florida		Sarasota Florida	
34242		34277	
The name and the Florida street address of the registered agent are: Richard T. Sanetti Name 665 Beach Road		2010 DEC -1 SECHETARY C	
	Florida	street address (P.O. Box NOT acceptable)	
Sa	ırasota	_{FL} 34242	AM II: 21 OF STATE
_		City, State, and Zip	- 128 - 128
liability company o registered agent and o statutes relating to t	at the place design agree to act in this he prope r o nd con	nt and to accept service of process for the chated in this certificate, I hereby accept the scapacity. I further agree to comply with inplete performance of my duties, and I am as registered agent as provided for in C	ne appointment as the provisions of all n familiar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

Name and Address:		
Richard T. Sanetti		
665 Beach Road		
Sarasota, Florida 34242		
Adam Joseph		
665 Beach Road		
Sarasota, Florida 34242		
Richard E. Tanksley		
665 Beach Road		
Sarasota, Florida 34242	S. 5	3
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1 0044	35	···
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be specific and cannot be more than fi	ive business day	s p
	665 Beach Road Sarasota, Florida 34242 Adam Joseph 665 Beach Road Sarasota, Florida 34242 Richard E. Tanksley 665 Beach Road Sarasota, Florida 34242 e date of filing: January 1, 2011	Adam Joseph 665 Beach Road Sarasota, Florida 34242 Richard E. Tanksley 665 Beach Road Sarasota, Florida 34242

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Adam Joseph

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)