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SECKETARY OF STATE
AND AHASSEE! FLORIDA

J. SAULSBERRY EXAMINER FEB 2 3 2011

COVER LETTER

TO: Registration Section

Division of Corporations					
SUBJECT: That Works!, LLC					
SCBSECT	ed Liability Compa	iny		-	
The enclosed Articles of Organization and fee(s) are	submitted for filing	; .			
Please return all correspondence concerning this matt	ter to the following	:			
Ann McGlinn-Work					
AIII WOOMINI-WORK	Name of Person		· -	201	
That Works! LLC			SECRE	E	
	Firm/Company		AS In	<u>8</u>	Carrena L
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99611 Overseas Hwy, PM	Address		- T	PM 4: 24	
	71007035		SE SE	: 21	
Key Largo, FL 33037			ا خرا		
	y/State and Zip Code				
annmcglinn@yahoo.com E-mail address: (to be used f	for future annual reno	art notification)			-
·	•	Tt Homeauton)			
For further information concerning this matter, please	e can:				
Ann McGlinn-Work	at (954	599-7917			
Name of Person	Area Code	& Daytime Telep	phone Number	_	
Enclosed is a check for the following amount:	_	_	_		
\$125.00 Filing Fee \$\times 130.00 Filing Fee \$\times Certificate of Status	\$155.00 Filin Certified Cor	_	\$160.00 Filing Certificate of S	•	
	(additional copy	•	Certified Copy (additional copy is		
Mailing Address		urier Address			
Registration Section Division of Corporations		on Section of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	Clifton B				
rananassee, fl 32314		ee, FL 32301	Hele		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Con	mpany is:
That Works!, LLC	
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")
•	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
45 SE Marlin Ave	99611 Overseas Hwy, PMB 124
Key Largo, FL 33037	Key Largo, FL 33037

ARTICLE I - Name:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Gene E. Work

Name

45 SE Marlin Ave

Florida street address (P.O. Box NOT acceptable)

Key Largo

Gity, State, 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:

"MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	Gene E. Work	
	45 SE Marlin Ave	
	Key Largo, FL 33037	201 AL SE
MGR	Ann E. McGlinn-Work	CRET
	99611 Overseas Hwy, PMB 124	22 \$\$
	Key Largo, FL 33037	m~ -0
		F.S.
		
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(Use attachment if necessary)	•	
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days after the date of filing.) REQUIRED SIGNATURE:		ive business day
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a memb	pe specific and cannot be more than fi	ive business day

Gene E. Work

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)