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SECRETARY OF STATE

J. BRYAN

APR - 7 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lets Make Whoopie	
	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Ryan VanWagner	DESE TO
	Name of Person
- '	Firm/Company EGO F
121 Sapphire Court	Name of Person ARE TO STAND T
121 Suppling Source	Address
Auburndale, FL 33823	
	ty/State and Zip Code
vanwagner4@yahoo.com	for future annual report notification)
For further information concerning this matter, pleas	
Ryan VanWagner	at (407) 484-3183
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability C	Company is:			
Lets Make Whoopie LLC				
ARTICLE II - Address:	"Limited Liability Company, "L.L.C.," or "LLC.") ess of the principal office of the Limited Liability	Company is:		
Principal Office Address:	Mailing Address:			
121 Sapphire Court Aubumdale, FL 33823	121 Sapphire Court Auburndale, FL 33823	-		
		another Si		
Kate McCoy	TESS OF the registered agent are.	. I		
	Name	RY O		
711 Gene	va Street	AMII: 30 OF STATI		
Flo	rida street address (P.O. Box NOT acceptable)	E ω		
Occee	3/761	om wa		

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..

City, State, and Zip

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:

<u>Title;</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Me	mber
mgr	Ryan VanWagner
	121 Sapphire Court
	Auburndale, FL 33823
mgr	Scott McCoy
 	771 Geneva Street
	Ocoee, FL 34761
	AR PR
	SSEE, FLOWER
	FIST II.
	33
(Use attachment if necessar	y)
CLE V: Effective date, if of	er than the date of filing: (OPTIONAL)
enective date is usted, the d O days after the date of fili	ate must be specific and cannot be more than five business days prior
o days after the date of fini	<i>5·)</i>
REQUIRED SIGNATUR	E:
	(i o o i
	Us I Vie
Ct.	- Fylor 4 v
Signature	of a member or an authorized representative of a member.
(In accordance wit	section 608.408(3), Florida Statutes, the execution of this document
(In accordance wit constitutes an affi	<u> </u>

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Ryan VanWagner

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee