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SECKE PARTOR ATTIONS

JIVISTON OF CORPORATIONS

T. HAMPTON

JUL 10 2011

TVANSINER

### COVER LETTER

TO:	Registratio Division of	n Section Corporations		
SURI	ECT: CHF	RISTIAN THOMAS	, LLC	
<b>ЗОВ</b>	EC1.		ted Liability Company	
The e	nclosed Article	es of Organization and fee(s) are	submitted for filing	
		respondence concerning this mat		
1 10400		_		
	<u>CHRIS</u>	TIAN THOMAS	Name of Person	_
	011010	T.A.L. T.LO.LAG		
	CHRIS	TIAN THOMAS, LL	Firm/Company	_
	935 TO	WN HALL AVENUE	Address	_
			Address	
	JUPITER	R, FL 33458	What and Tim Code	_
	MARY@F	ات ROGERGTHOMASGC	ty/State and Zip Code	
	1117 (1 (1 (2)		for future annual report notification)	
For fu	rther informati	on concerning this matter, please	e call:	
MAF	RY TAMBU	JRELLO	at (561 ) 768-9623	
		me of Person	Area Code & Daytime Telephone Number	
		k for the following amount:		
<b>√</b> ]\$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Ccrtified Copy Certificate of Status &	k
			(additional copy is enclosed) Certified Copy (additional copy is enclosed)	ed)
			(4445.12555) 15 6161653	/
		Mailing Address Registration Section	Street/Courier Address Registration Section	
		Division of Corporations	Division of Corporations	
		P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
			Tallahassee, FL 32301	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	ICI	E	ĭ -	Na	me:

The name of the Limited Liability Company is:

#### CHRISTIAN THOMAS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
935 TOWN HALL AVENUE	935 TOWN HALL AVENUE JUPITER, FL 33458
JUPITER, FL 33458	001 11 ETC, 1 E 00400

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:

# CHRISTIAN THOMAS Name 935 TOWN HALL AVENUE Florida street address (P.O. Box NOT acceptable) JUPITER FL 33458 City, 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

SECRETARY OF STATE DIVISION OF CORPORATIONS

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	CHRISTIAN THOMAS
	935 TOWN HALL AVENUE
	JUPITER, FL 33458
<del></del>	
(Use attachment if necessary)	
CLE V: Effective date, if other tha	n the date of filing: (OPTIONAL
effective date is listed, the date mu	ust be specific and cannot be more than five business days
0 days after the date of filing.)	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE.	
[/	1/w
Signature of a pr	ember or an authorized representative of a member.
	on 608.408(3), Florida Statutes, the execution of this document

(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.)

#### CHRISTIAN THOMAS

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)

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