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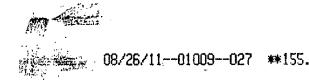
(Requestor's Name)
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SECRETARY OF STATE

1.

C. LEWIS

AUG 2 9 2011

EXAMINER

COVER LETTER

4

TO: Registration Section Division of Corpor			
SUBJECT: Feelin' F	ly, LLC.		
	Name of Limit	ted Liability Company	
The enclosed Articles of Org	ganization and fee(s) are	submitted for filing.	
Please return all corresponde	ence concerning this mat	ter to the following:	
Condoos M	lilliama		
Candace W	ımams	Name of Person	
Feelin' Fly,	LLC,		
		Firm/Company	
10913 NW 1	9 Street		
		Address	
Carol Caringo	EL 22074		
Coral Springs		ty/State and Zip Code	
candyrou@bell		y///auto una lap occió	
		for future annual report notification)	
For further information conc	erning this matter, please	e call:	
Candace Williams		_at (954) 557-3512	
Name of Pe	rson	Area Code & Daytime Tele	ephone Number
Enclosed is a check for the \$125.00 Filing Fec \$1	•	\$155.00 Filing Fec & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P.	failing Address egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	S

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

_ "			
Feelin' Fly, LLC.			
(Must end wit	h the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and st	reet address of t	the principal office of the Limited	Liability Company is:
Principal Office Address	<u>i</u>	Mailing Address:	
10012 NIM 10 Ct		10913 NW 19 St.	
10913 NVV 19 St.			
		Coral Springs	
10913 NW 19 St. Coral Springs Fl. 33071 ARTICLE III - Registers	d Agent. Regis	Coral Springs Fl. 33071	t's Signature:
Coral Springs Fl. 33071 ARTICLE III - Registere	nnot serve as its own ida registration.)	Coral Springs Fl. 33071 tered Office, & Registered Agent Registered Agent. You must designate an in	dividual or another
Coral Springs Fl. 33071 ARTICLE III - Registere (The Limited Liability Company cabusiness entity with an active Flor	nnot serve as its own ida registration.)	Coral Springs Fl. 33071 tered Office, & Registered Agent Registered Agent. You must designate an in	dividual or another
Coral Springs Fl. 33071 ARTICLE III - Registere (The Limited Liability Company cabusiness entity with an active Flor	nnot serve as its own ida registration.) street address of ace Williams	Coral Springs Fl. 33071 tered Office, & Registered Agent Registered Agent. You must designate an in	tividual or another ZIIII AUG 26
Coral Springs Fl. 33071 ARTICLE III - Registere (The Limited Liability Company cabusiness entity with an active Flor The name and the Florida Cand	nnot serve as its own ida registration.) street address of ace Williams	Coral Springs Fl. 33071 tered Office, & Registered Agent Registered Agent. You must designate an interest the registered agent are: Name	tividual or another ZIIII AUG 26
Coral Springs Fl. 33071 ARTICLE III - Registere (The Limited Liability Company cabusiness entity with an active Flor The name and the Florida Cand	nnot serve as its own ida registration.) street address of ace Williams	Coral Springs Fl. 33071 tered Office, & Registered Agent Registered Agent. You must designate an interest the registered agent are: Name	tividual or another ZIIII AUG 26
Coral Springs Fl. 33071 ARTICLE III - Registere (The Limited Liability Company cabusiness entity with an active Flor The name and the Florida Cand	nnot serve as its own ida registration.) street address of ace Williams	Coral Springs Fl. 33071 tered Office, & Registered Agent Registered Agent. You must designate an in the registered agent are: Name St.	dividual or another 2011 AUG

Registered Agent's Signature (REQUIRED)

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..

(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:		FILE	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address	2011 AUG 2 SECRETAR TALLAHASS	Y OF ST
MGR	Candace Williams 10913 NW 19 St.		
	Coral Springs, Fl. 33071		

(Use attachment if necessary)			
CLE V: Effective date, if other than th	ne date of filing:	(OPTIONA	
CLE V: Effective date, if other than the effective date is listed, the date must	ne date of filing:		
CLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)	ne date of filing: be specific and cannot be more than five		
CLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five	e business da	
CLE V: Effective date, if other than the effective date is listed, the date must 20 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	be specific and cannot be more than five	e business day	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees: