

L11000113637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

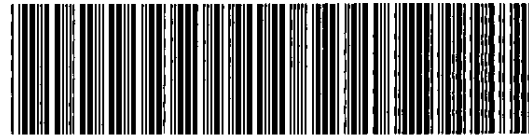
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

OCT 12 2011

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Divorce Party, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nancy La Vista  
Name of Person

Flip - Her Productions, Inc.  
Firm/Company

800 N. Ocean Drive #201  
Address

Juno Beach FL 33408  
City/State and Zip Code

nlavista@clarkfountain.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Nancy La Vista at ( 561 ) 899-2107  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

**FILED**  
OCT 11 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
Divorce Party Florida, LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT**

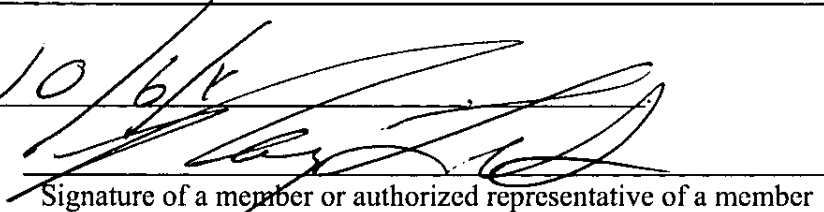
Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

the name was filed without the word "Florida"  
in the title. It is on the contracts & offering  
documents so needs to be amended.

**OR**

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: 10/6/11  


Signature of a member or authorized representative of a member

Nancy La Vista on behalf of Flip Her Productions, Inc  
Typed or printed name of signee

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L11000113637  
FILED 8:00 AM  
October 04, 2011  
Sec. Of State  
ncausseaux

**Article I**

The name of the Limited Liability Company is:

DIVORCE PARTY LLC

**Article II**

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

800 N OCEAN DRIVE  
201  
JUNO BEACH, FL. 33407

The mailing address of the Limited Liability Company is:

800 N OCEAN DRIVE  
201  
JUNO BEACH, FL. 33407

**Article III**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

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

NANCY LA VISTA  
800 N OCEAN DRIVE  
201  
JUNO BEACH, FL. 33407

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TALLAHASSEE, FLORIDA

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.

Registered Agent Signature: NANCY LA VISTA

### Article V

The name and address of managing members/managers are:

Title: MGRM  
FLIP-HER PRODUCTIONS INC.  
800 N OCEAN DRIVE 201  
JUNO BEACH, FL. 33408

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ncausseaux

### Article VI

The effective date for this Limited Liability Company shall be:

10/04/2011

Signature of member or an authorized representative of a member

Electronic Signature: NANCY LA VISTA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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TALLAHASSEE, FLORIDA