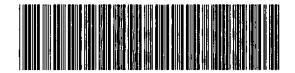
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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2011 OCT -6 AM N: 80 SECRETARY OF STATE

OCT 7 2011 EXAMINER

COVER LETTER

Registration Section TO: **Division of Corporations** Phillipian, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: John R. Phillips, Jr. Firm/Company 4645 15th Ave South Address St. Petersburg, Florida 33711 City/State and Zip Code pdcorp88@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John R. Phillips, Jr. 727 321-3689
Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **√**\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy

Mailing Address

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

Street/Courier Address

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the L	imited Liability Company i	s:	
	Phillipian, l	LLC	
(M		bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad The mailing address		principal office of the Limited Liability Com	pany is:
Principal Office A	Address:	Mailing Address:	
4645 15th Ave South St. Petersburg , Florida 33711		4645 15th Ave South	
		St. Petersburg, Florida 33711	
business entity with an	Florida street address of the John R. Ph	nillips, Jr.	TITE ME:00
	4645 15th A	ve South	
	St. Petersburg		@
		State, and Zip	
liability compa registered agent a statutes relating	ny at the place designated in nd agree to act in this capac to the proper and complete _l	o accept service of process for the above stated n this certificate, I hereby accept the appointme rity. I further agree to comply with the provisio performance of my duties, and I am familiar wi gistered agent as provided for in Chapter 608, I	nt as ns of all th and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing The name and address of each Manager or Title: "MGR" = Manager "MGRM" = Managing Member MGR		SECRETARY OF S TALLAHASSEE.FL	
"MGR" = Manager "MGRM" = Managing Member	John R. Phillips, Jr. 4645 15th Ave South		TATE ORID
MGR	4645 15th Ave South	· · · · · ·	
-		<u> </u>	
_	St. Petersburg, Florida 337	'11	
_			
· ·			
·			
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the date of If an effective date is listed, the date must be spector or 90 days after the date of filing.)	of filing: October 3, 2011 ific and cannot be more than	(OPTIONAL) five business days pr	ior
REQUIRED SIGNATURE:	<u>(</u>		
Signature of a member or an	authorized representative of a mo	ember:	
(In accordance with section 608.408(3) constitutes an affirmation under the pe I am aware that any false information sconstitutes a third degree felony as pro-), Flotida Statutes, the execution of the native of perjury that the facts stated submitted in a document to the Depa	his document d herein are true.	

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)

Typed or printed name of signee