

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000281474 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009

: (305)599-0839

Fax Number : (305)592-9591

\*\*Enter the email address for this business entity to be used for Muture annual report mailings. Enter only one email address please.\*\*

| Email | Address: |  |
|-------|----------|--|
|       |          |  |

## FLORIDA LIMITED LIABILITY CO. TALULA, LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 1        |
| Page Count            | 02       |
| Estimated Charge      | \$155.00 |

DEC 0 1 2011

EXAMINER

Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:   |  |    |
|---|--|----|
| The name of the Limited Liability Compa   | any is:  |    |
| TALULA, LLC   |  |    |
| (Must end with the words 'Limits  | ed 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 | 3: |
| Principal Office Address:   | Malling Address:   |    |
| 2300 SW 43RD ST APT J-3   | 2300 SW 43RO ST APT J-3                                  |    |
| GAINESVILLE, FL 32607   | GAINERVILLE, FL 32507                                    |    |
| The Limited Liability Company cannot serve as its own business entity with an author Florida registration.)  The name and the Florida street address of DANIELLE RULE | HASS   | 7  |
|   | ري   | m  |
|   |  |    |
| GAINESVILLE   | pcr address (P.O. Box NOT acceptable)                    |    |
| C   | ity, 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

|  |  | Name and Address:  |
|--|--|--|
| Title: "MGR" = Manager   | r  |  |
| "MORM" = Manag   |  | 1  |
| MGRM   |  | DANIELLE RULE  |
| 101-01-01-01   | <del>-</del> .   | 2300 SW 43RD ST APT J-3  |
|  |  | GAINESVILLE, FL 32607  |
|  |  |  |
|  |  |  |
|  | •  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| <del></del>  | _  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | =  |  |
|  |  |  |
| •  |  | date of filins:  |
| LE V: Effective dat<br>Tective date is listed  | te, if other than the i  | date of filing: (OPTIONA specific and cannot be more than five business day  |
| LE V: Effective dat<br>fective date is listed  | te, if other than the i  | date of filing:  apecific and cannot be more than five business day  |
| LE V: Effective date fective date date date  | te, if other than the id, the date must be of filing.)   | apecific and cannot be more than five business day   |
| LE V: Effective date for the date days after the date  | te, if other than the id, the date must be of filing.)   | apecific and cannot be more than five business day   |
| (Use attachment if a LE V: Effective data tective date is listed days after the date REQUIRED SIGN   | te, if other than the id, the date must be of filing.)   | specific and cannot be more than five business day   |
| LE V: Effective date for the date days after the date  | te, if other than the id, the date must be of filing.)   | specific and cannot be more than five business day   |
| LE V: Effective date fective date date date date REOUTRED SIGN   | te, if other than the all, the date must be of filling.)   | specific and cannot be more than five business day   |
| LE V: Effective date fective date date date date REQUIRED SIGN   | te, if other than the all, the date must be of filling.)   | specific and cannot be more than five business day   |
| LE V: Effective date fective date date days after the date REOUIRED SIGN   | te, if other than the id, the date must be of filing.)  NATURE:  Ignature of a member ance with section 608.   | apecific and cannot be more than five business day  ALCARY  ASSET  OF an authorized representative of a member.  |
| LE V: Effective date fective date date date date served se | te, if other than the id, the date must be of filing.)  NATURE:  Ignature of a member ance with section 608.   | apecific and cannot be more than five business day  ALL ARY  or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document  |
| LE V: Effective date fective date date is listed days after the date REOUTRED SIGN  (In accordance on stitutes I am awan   | te, if other than the id, the date must be of filing.)  NATURE:  Ignature of a member ance with section 608.45 an affirmation under that any false information that are that a | apecific and cannot be more than five business day  ASSE  or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true to the Department of States are accounted for in a document of the Department of States are accounted for in a document. |
| LE. V: Effective date fective date date is listed days after the date REOUTRED SIGN  (In accordance to the constitutes of the accordance to the constitutes of the co | ite, if other than the it, the date must be of filing.)  NATURE:  Ignature of a member ance with section 608.45 an affirmation under that any false informs a third dagree felony:   | or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true as provided for in s.817.155, F.S.)   |
| LE. V: Effective date fective date date is listed days after the date REOUTRED SIGN  (In accordance to the constitutes of the accordance to the constitutes of the co | te, if other than the it, the date must be of filing.)  NATURE:  Enature of a member ance with section 608.4 an affirmation under that any false information at third dagree felony:  DANIELLE RUI   | apecific and cannot be more than five business day  ASSECTARY OF  or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document the penalties of penjury that the facts stated herein are transition submitted in a document to the Department of States as provided for in s.817.155, F.S.)                    |
| LE. V: Effective date fective date date is listed days after the date REOUTRED SIGN  (In accordance to the constitutes of the accordance to the constitutes of the co | te, if other than the it, the date must be of filing.)  NATURE:  Enature of a member ance with section 608.4 an affirmation under that any false information at third dagree felony:  DANIELLE RUI   | or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true as provided for in s.817.155, F.S.)   |
| LE V: Effective date fective date date is listed days after the date REOUTRED SIGN  (In accordence to the constitutes of the according to the constitutes of the cons | te, if other than the it, the date must be of filing.)  NATURE:  Enature of a member ance with section 608.4 an affirmation under that any false information at third dagree felony:  DANIELLE RUI   | apecific and cannot be more than five business day  ASSECTARY OF  or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document the penalties of penjury that the facts stated herein are transition submitted in a document to the Department of States as provided for in s.817.155, F.S.)                    |
| LE. V: Effective date fective date is listed days after the date REOUIRED SIGN  (In accordance on stitutes I am awan constitutes I awan constitutes | te, if other than the it, the date must be of filing.)  NATURE:  Enature of a member ance with section 608.4 a affirmation under that any false information at third degree felony:  DANIELLE RUI  | apecific and cannot be more than five business day  ASSECTARY OF  or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document the penalties of penjury that the facts stated herein are transition submitted in a document to the Department of States as provided for in s.817.155, F.S.)                    |