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SECRETARY OF STATE

J. BRYAN

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## **COVER LETTER**

TO: Registration Division of C			
SUBJECT: Moxic	etude, LLC		
		Liability Company	
The enclosed Articles	of Organization and fee(s) are sul	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	•
Andrea I			
	N	ame of Person	
Moxietuo	de, LLC		
	F	irm/Company	~~
5094 NW	V 50th Court		TAREOT T
		Address	記。
Coconut C	Creek, FL 33073		ETARY OF
•	City/S	tate and Zip Code	FELORESTATION
andrea@m	oxietude.com		吳玉 3
	E-mail address: (to be used for	future annual report notification)	OF -
For further information	n concerning this matter, please ca	ill:	
Andrea Mathieu	l a	, 954 421-0608	•
Name	e of Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check f	for the following amount:		
\$125.00 Filing Fee [	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center C	s

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Moxietude, 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:** 5094 NW 50th Court 5094 NW 50th Court Coconut Creek, FL 33073 Coconut Creek, FL 33073 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.) Effective Date 0//02/12 The name and the Florida street address of the registered agent are: Andrea Mathieu Name 5094 NW 50th Court Florida street address (P.O. Box NOT acceptable) Coconut Creek <sub>FL</sub> 33073

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Andrea D. Mathieu
	5094 NW 50th Court Coconut Creek, FL 33073
MGR	Emily Marciniak
	10409 Collingham Drive
	Fairfax, VA 22032
	•
(Use attachment if necessary)	
LE V: Effective date, if other than the	ne date of filing: January 2, 2012 . (OPTION be specific and cannot be more than five business d

Signature of a member or an authorized representative of a member.

(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.)

Typed or printed name of signee

Filing Fees:

**REQUIRED SIGNATURE:** 

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)