L120000040024

(Requestor's	Name)
(Address)	
(Address)	
(City/State/Zi	p/Phone #)
PICK-UP W	AIT MAIL
(Business Er	tity Name)
(Document N	umber)
Certified Copies Cer	tificates of Status
Special Instructions to Filing Offi	cer:

Office Use Only



400225144144

03/21/12--01023--009 **130.00

12 MAR 21 PM I2: 31 Secondary of State

C. LEWIS

MAR 2 2 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: That Fanny Shirt LLC Name of Limited Liability Company
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:
Jenifer McDanie Name of Person
That Funny Shirt LLC
' Firm/Company
11214 Branblobrush st Address
Address
Tampa FL 33624 City/State and Zin Code
Tampa FL 33644 City/State and Zip Code Scotle & Band @ Yahov. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scott Band at (813) 679-3308 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$\$155.00 Filing Fee \$\text{\$Certificate of Status}\$\$\$Certified Copy (additional copy is enclosed)\$\$\$Certified Copy

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

Street/Courier Address
Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
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:	
11214 Branblebrush st Tampa FL 33624	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signa (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or business entity with an active Florida registration.)	ature: another
The name and the Florida street address of the registered agent are:	<u>12</u>
Scott Band	FIL 12 MAR 21
Name	L
11214 Bramblebrush st	S 2 ED
Florida street address (P.O. Box NOT acceptable)	PH 12: 3
Tanpa FL 33624	<u>결류 의</u>
City, 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

Title:	Name and Address:
"MGR" = Manager	SECRETARY OF ST
"MGRM" = Managing Member	TALLAHASSEE, FL
MLR	South Book
111011	11214 Branblebrush st
	Tanna FL 33624
4.0	
MGR	Jenifer McDaniel
	11714 Bramble brush st
	Tampa FL 33624
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Effective date, if other that	an the date of filing: .(OPTIONA
LE V: Effective date, if other that	
LE V: Effective date, if other that	
LE V: Effective date, if other that fective date is listed, the date m	
LE V: Effective date, if other that fective date is listed, the date medays after the date of filing.)	an the date of filing: (OPTIONA ust be specific and cannot be more than five business day
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE:	ust be specific and cannot be more than five business day
LE V: Effective date, if other thate the date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE:	ust be specific and cannot be more than five business day
LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business day
LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a manual content of the date of the	nember or an authorized representative of a member.
LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a management of the date of the dat	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true.
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)