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2012 MAY 29 AM '9: 02
SECRETARY OF STATE TALLAMASSEE FLORIST

J. SAULSBERRY EXAMINER

MAY 3 0 2012

COVER LETTER

TO: —Registration Section
Division of Corporations

SUBJECT: MilitaryLounge, LLC		
Name of Limit	ed Liability Company	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mate	ter to the following:	
Jason Wilbur		
	Name of Person	4:
MilitaryLounge, LLC	ALLA A	2012 HAY
	Firm/Company	Y2
166 Baywind Dr		R 9
	Address	3 6
Niceville, FL 32578	Ŝ	202
	y/State and Zip Code	
jason.wilbur@gmail.com		
	for future annual report notification)	
For further information concerning this matter, please	e call:	
Jason Wilbur	at (206) 851-9233	
Name of Person	Area Code & Daytime Telephone Numb	per
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times\$ Certificate of Status	Certified Copy Certifica (additional copy is enclosed) Certified	Filing Fee, ate of Status & I Copy I copy is enclosed)
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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I	- Name:
The name of	the Limited Liability Company is:
Military	Lounge, 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:
166 Baywind Dr Niceville, FL 32578	166 Baywind Dr Niceville, FL 32578
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of the Jason Wilbur	ne registered agent are: SECRETARY ALLAHASSE me
Na	me SSR N
166 Baywind	address (P.O. Box NOT acceptable)
Florida street	address (P.O. Box NOT acceptable)
Niceville	_{FL} 32578
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)

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

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

MGRM	Jason Wilbur 166 Baywind Dr		<u> </u>
MGR	Niceville, FL 32578 Jeff Gilmore	2912 HA SECTE TALLAH	
	1375 Valley Glenn Dr	HE I	—]
	Dixon, FL 95620	25 SSE	_ [[
		F. G. ₹	_ <u>_</u> _
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(Use attachment if necessary)			
LE V: Effective date, if other than	the date of filing:	(OPTIC	ONA
fective date is listed, the date mus			

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.)

Jason Wilbur

Typed or printed name of signee

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)