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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CORKFRY, LLC	·
50B0B011	Limited Liability Company
	u de la companya de
The enclosed Articles of Organization and fee(s	Limited Liability Company s) are submitted for filing.
Please return all correspondence concerning thi	
Joe Miklas, Esq.	
	Name of Person
Joe Miklas, P.A.	
	Firm/Company
P.O. Box 366	
	Address
Islamorada, FL 33036	
isiamorada, i E 00000	City/State and Zip Code
adamizer@aol.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter,	please call:
Pamela Setchell	at (305) 852-7225
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	nt:
\$125.00 Filing Fee \$\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	
Mailing Address Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231	Clifton Building

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION OF CORKFRY, LLC

ARTICLE I – Name: The name of the Limited Liability Company is CORKFRY, LLC.

ARTICLE II – Address: The mailing address of the Limited Liability Company is: P.O. Box 1170, Tavernier, FL 33070. The street address of the principal office of the Limited Liability Company is: 113 Ponce de Leon Blvd., Islamorada, FL 33036.

ARTICLE III – Registered Agent and Registered Office: The name and Florida street address of the registered agent are:

Joe Miklas, Esq., 88765 Overseas Highway, Tavernier, FL 33070

ARTICLE IV - Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Managing Member

Adam Fryman 125 N. Coconut Palm Blvd. Tavernier, FL 33070

(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.)

Adam Fryman

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, Florida Statutes.

Joe Mikkas