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PICK-UP	■ WAIT	MAIL
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SECRETARY OF STARE

T. CLINE NOV 27 2012 EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TTOE THE GIGMAN, LLC 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:
TOSEPH B. MALLOY SR Name of Person
TIVETHE 6/6MAN Firm/Company
Firm/Company
1501 NE 13TH TERRACE APT H-3
Address
TJENSEN BEACH, FL. 34957 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TOSEPH B. MALLOY 5R at (772) 353-2459 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee & Certificate of Status □\$155.00 Filing Fee & Certificate of Status □\$155.00 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 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:

(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:

ISOINE 13TH TERRACE APT H-3 JENSEN BEACH, FL. 34957

Mailing Address:

1501 NE 13TH TERRAGE ATH- 3 TENSENBERY FL. 34957

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.)

The name and the Florida street address of the registered agent are:

Florida street address (P.O. Box NOT acceptable)

JENSEN BEACH FL 34957 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..

Page 1 of 2

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	JOSEPHB, MALLOY SR 1301 NE 13TH TERRACE LIENSEN BRACH, FL 34957
LE V: Effective date, if other than the ffective date is listed, the date mu	ne date of filing:
LE V: Effective date, if other than the ffective date is listed, the date mu or 90 days after the date of filing.)	st be specific and cannot be more than five busin
LE V: Effective date, if other than the ffective date is listed, the date mu or 90 days after the date of filing.) REQUIRED SIGNATURE:	st be specific and cannot be more than five busing
rective date is listed, the date mu or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a mem	st be specific and cannot be more than five busin

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)