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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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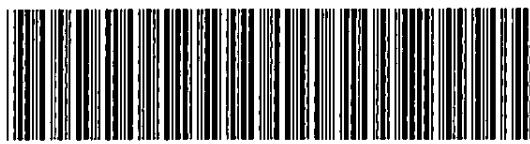
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EXAMINER



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TALLAHASSEE, FLORIDA

FILED



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 433324 4305390

AUTHORIZATION : *Spud Hansen*

COST LIMIT : \$ 125.00

ORDER DATE : November 26, 2012

ORDER TIME : 11:34 AM

ORDER NO. : 433324-010

CUSTOMER NO: 4305390

DOMESTIC FILING

NAME: TEDDY FAMILY HOLDINGS, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 52949

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TEDDY FAMILY HOLDINGS, 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:

870 South Collier Blvd. Apt. 503
Marco Island, FL 34145

Mailing Address:

870 South Collier Blvd. Apt 503
Marco Island, FL 34145

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:

Ethel Jachera

Name

870 South Collier Blvd. Apt 503

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

Marco Island

FL 34145

City, State, and Zip

STATE OF FLORIDA
REGISTRATION OF STATE
TALLAHASSEE, FLORIDA

12 NOV 27 AM 11:50

REC'D
FL
FD

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.

Ethel Jachera

By: Ethel Jachera

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

RESULTS

MGRM

Ethel Jachera

Eric Jachela 870 South Collier Blvd. □ 15-533

870 38th Conch Blvd.
Marco Island, FL 34145

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Pithel Tschirner

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.)

Ethel Jachera, Member

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation

**Filing Fee for Articles
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 50.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)