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COVER LETTER

TO:	Registration S Division of Co				
SUBJE	_{cr.} Sear	Tobin, LLC.			
SUBJE	CI:		ed Liability Compa	any	
The enc	losed Articles of	Organization and fce(s) are :	submitted for filing	3 .	
Please r	eturn all corresp	ondence concerning this matt	er to the following	:	
	Sean T	obin			
_	, 4 ² .		Name of Person		,
-			Firm/Company		
I	644 40t	h St			
_			Address		
	Sarasof	a, Fl 34234			
-			y/State and Zip Code	2	
-	Seantobin	85@yahoo.com E-mail address: (to be used to	for future annual repo	ort notification)	· · · · · · · · · · · · · · · · · · ·
For furt	her information (concerning this matter, please	e call:		
_	an Tobir			323-71	117
		of Person	at (Area Code) & Daytime Telep	
Englos	ad is a shool fo	or the following amounts			
		or the following amount:	□€155.00 EX	E & C	C140 00 Eiling Fac
□ \$125.0	00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Co (additional cop	ру	\$160.00 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	Registrat Division Clifton E 2661 Exe	ourier Address ion Section of Corporations Building ecutive Center C see, FL 32301	•

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Con	npany is:
Sean Tobin, LLC.	
(Must end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
644 40th St	644 40th St
Sarasota, FL 34234	Sarasota, Fl 34212
The name and the Florida street address Brent Karweck	
	Name The Transfer of the Trans
902 Mill Creek Rd	
	la street address (P.O. Box NOT acceptable)
Bradenton, Fl 34	City, State, and Zip
	City, State, and Zip
liability company at the place desig registered agent and agree to act in t all statutes relating to the proper and	nt and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of d complete performance of my duties, and I am familiar with ition as registered agent as provided for in Chapter 608, F.S.
/	
Registered Age	ent's signature (REQUIRED)
	•

(CONTINUED)

Page 1 of 2

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

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

"MGRM" = Managi		
MGR		Sean Tobin
		644 40th St
		Sarasota, Fl 34212
		1000
(Use attachment if n	• •	
CLE V: Effective dat	e. if other than the d	date of filing: (OPTIONA
effective date is liste o or 90 days after the	ed, the date must l	be specific and cannot be more than five busine
REQUIRED SIGN	ATURE:	

Sean Tobin

Typed or printed name of signee

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

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)