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(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
. (Do	ocument Number))
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SECRETARY OF STATE
ONLY AN ESSEE, FLORIDA

B. BOSTICK JUL **2 4** 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Frantastic Books 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:	
Frances Addeo Name of Person	
Firm/Company	
2495 Coval Ridge Civele	
Melbourne FL 32935	
dr fran a mindspring. com	
For further information concerning this matter, please call:	ا ا ا
Frances Addeo at 321 368.646 33 368.646 33 368.646 33 368.646 34 32 368.646 34 32 368.646 34 32 368.646 34 32 368.646 34 32 368.646 34 32 368.646 34 32 368.646 34 32 32 368.646 34 32 32 32 32 32 32 32 32 32 32 32 32 32	e unqu
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □\$125.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	i
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

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:	
Frantastic Bo	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2495 Coral Ridge Circle Mclbourne FL 32935	2495 Coval Ridge Civele Melbourne FL 32935
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
Melbourne	gistered agent are: Addeo Ridge Civele ess (P.O. Box NOT acceptable) FL 32935 e, and Zip
liability company at the place designated in the registered agent and agree to act in this capacit all statutes relating to the proper and complete	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as by. I further agree to comply with the provisions of performance of my duties, and I am familiar with istered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Frances Added 2495 Coval Ridge C Melbourne FL 329	
		2213
		RELIVERED AND ASSESSED
Use attachment if necessary)		≘,. 3
•		(OPTION
fective date is listed, the date must or 90 days after the date of filing.)	be specific and cannot be more than t	
fective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than to $n = n = n$	five busin
or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a may are that any false information under of a may are that any false information or may be a	be specific and cannot be more than t	five busing

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)