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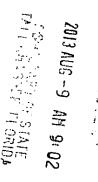
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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J. SAULSBERRY EXAMINER AUG 12 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SHRIECT:

3DARTwear

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:

Name of Person		
3DARTwear		
Firm/Company		
9301 Northlake Pkwy		
Address		_
Orlando, FL, 32827	罗· 一场	(111)
City/State and Zip Code		
kevin.ott1@gmail.com		į
E-mail address: (to be used for future annual report notification)	7767	
further information concerning this matter, please call:	7	
Cevin Ott757 _ 630-6852		7.0

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

■ \$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

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

The name of the	Limited Liability Company	y is:	
3DARTwear LLC.			
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A		ne principal office of the Limited Lia	ability Company is:
Principal Office	Address:	Mailing Address:	
9301 Northlake Pkwy	1	9301 Northlake Pkwy	
Orlando, FL 32827		Orlando, FL 32827	
The Limited Liability business entity with a		ered Office, & Registered Agent's Registered Agent. You must designate an individual the registered agent are:	
	Kevin Ott		ALGO TI
	N 9301 Northlake Pkwy	ame	4 Parameter
		et address (P.O. Box NOT acceptable)	
	Orlando	_{FL} 32827	<u> </u>
	Cit	y, State, and Zip	02

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..

Registered Agent'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" = Managing Member	
MGR	Kevin Ott
	9301 Northlake Pkwy
	Orlando, FL 32827
	2013
	25
	
(Use attachment if necessary)	
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LE V: Effective date, if other than effective date is listed, the date m	the date of filing: (OPTIONAL nust be specific and cannot be more than five business
LE V: Effective date, if other than	the date of filing: (OPTIONAL nust be specific and cannot be more than five business
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LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing REQUIRED SIGNATURE:	the date of filing: (OPTIONAL nust be specific and cannot be more than five business
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing REQUIRED SIGNATURE: Signature of a meteoristic constitutes an affirmation upon a management of the section constitutes are affirmation upon a management of the sectio	the date of filing: (OPTIONAL nust be specific and cannot be more than five business.)

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

\$ 5.00 Certificate of Status (Optional)