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(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	-	
(Business Entity Name)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		
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Effective Date 8/13/13

SECRE LARY OF STATE DIVISION OF CORPORATION

AUG 2 1 2013 T. HASSIPTCTA (850) 245-6051.

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Live Action Fishing 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:		
Eric Corrales Name of Person		
Name of Person Live Action Fishing LLC Elim/Company		
1100 SE 5th Court Unit # 42 Address		
Pompano Beach, FL 33060 City/State and Zip Code live action fishing @ yahoo. Com E-mail address (to be used for future annual report notification)		
live action fishing @ yahoo. com		
For further information concerning this matter, please call:		
Eric Corrales at (954) 303-2243 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 Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)		
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Effective Date 8 13 13

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	:
/	110
Live Action Fishing (Must end with the words "Limited Liab	LLC
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p Principal Office Address:	orincipal office of the Limited Liability Company is Mailing Address:
1100 SE 5th Court Unit#42 Pompano Beach, FL 33060	Same
Tompono Geoch, Fe 57000	
ARTICLE III - Registered Agent. Registere	d 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:

Eric Corrales

Name

2621 NE 8th Terrace

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

Pompan o Beach FL 33064

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..

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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (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:

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.)

Eric Corrales
Typed or printed name of signee

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)